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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Phone

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## LLC REGISTERED AGENT CHANGE **NEXCREST LLC**

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Name of the limited liability company: NEXCREST LLC (b) Mailing address of limited liability company: Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) 117 scott dr 117 Scott Drive sanford fl 32771 sanford fl 32771 L21000309844 07/04/21 Date of filing/registration in Florida Document number 3. 5. (a) ERIK EDWARDS Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 117 SCOTT DR. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SANFORD Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th St N **NEW** Registered Office Address: **STE 300** St. Petersburg If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Morgan Noble

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been Clow For Glover - Assistant Secretary

Signature of Registered Agent