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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**Enter the email address for this business entity to be used for future $\overset{\smile}{\circlearrowleft}$ annual report mailings. Enter only one email address please. **

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LLC REGISTERED AGENT CHANGE A LITTLE HELP 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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Na	ane of the limited liability company:		
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	07/26/2021 Date of filing/registration in Florida	L2100	Document number
	ZenBusiness Inc.		
(b)	Registered Agent and Registered Office shown on the records of		
	336 E. College Ave.	•	
	Registered Office Address [MUST BE FLORIDA STREET ADDRESS]		——————————————————————————————————————
	Suite 301		2024 HAR 26
	Tallahassee F1	32301	HAR 26 AM
	Registered Agents Inc		· · · · · · · · · · · · · · · · · · ·
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	50
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	33702	
ne cha gent v vas/we pe arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members cless of organization or the operating agreement of the ture of a member or authorized presentative of a member	f the registered ability compar of the limited l	l office and the business office of the register mathematically, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.

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 notified in writing of this change. und Specialis

- Assistant Secretary

Signature of Registered Agent

David Roberts