Division of Corporations Electronic Filing Cove

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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 : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE JPG SOLUTIONS 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 Florida

Florido		-	•
1. Na	me of the limited liability company: JPG SOLU	Ţ	TONS LLC
2. (a)	7 ()	Ī	(ls)
2. (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)
	7901 4th St N STE 300		7901 4th St N STE 300
	St. Petersburg FL 33702		St. Petersburg FL 33702
	07/26/21		L21000337969
3.	Date of filing/registration in Florida 4	ŧ.	Document number
5. (a)	GEORGE, TERRY		
J. (a)	Registered Agent and Registered Office shown on the records of the F	lur	rida Dept. of State:
	9833 HERMOSILLO DR		
	Registered Office Address (MUST BE FLORIDA STREET ADDI	R.	2 \$\$\$)
	•	ĺ	
	NEW PORT RICHEY	6	55
(b)	Registered Agents Inc		
	Enter name of NEW Registered Agent and/or NEW Registered Offl	ce i	address:
	7901 4th St N		2023 FFB
	NEW Registered Office Address:	ĺ	
	STE 300		. · · · · · · · · · · · · · · · · · · ·
	St. Petersburg . FL.33	7(02
the cha agent w was/we	mited liability company is not organized under the laws or or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limit	f if	the State of Florida, it is hereby confirmed that after gistered office and the business office of the registered company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in
	Patrice James		Robin Jones
Signat	ure of a member or authorized representative of a member	T	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 notified in writing of this change.

David Roberts - Assistant Segretary

Signature of Registered Agent

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