Division of Corporations

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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

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LLC REGISTERED AGENT CHANGE PRIORITY EXPRESS UNLIMITED LLC

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4/1/2024 09.53^{*}01 PDT **T** To: 18506176383 Page: 2/2 Fax: 8134365206

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.

l. Na	rune of the limited liability company: PRIORITY EXP	PRESS UNLI	MITED LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	09/16/2021	L:	21000410051
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	REPUBLIC REGISTERED AGENT LLC		
(47	Registered Agent and Registered Office shown on the records of	t the Florida De	pr. of State:
	1150 Nw 72nd Ave Tower I Ste 455		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	Miami	20100	
	Miami FI	L_33126	
	Registered Agents Inc		. ~
(p)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	2024 APR -1
			AP.
	7901 4th St N STE 300		$\mathcal{J} = \mathcal{J}$
	NEW Registered Office Address:		
			PH 1: 09
	St. Petersburg	33702	799
	, F1	l	
he cha igent v vas/we he arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the register iability comp of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
17 Je- 17	the and granding	Robi	n Jones
	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mere notified	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change.	ree to act in e performand ed for in Cha hereby conf	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and acce- pter 605, F.S. Or, if this document is being filed from that the limited liability company has been
4	Navid Roberts		
Signatu	re &l'Registered Agent		