A Floridat Department of State 633 Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : 120090000081 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.** Email Address: LLC REGISTERED AGENT CHANGE MFAYTRADE LLC Certificate of Status O Certified Copy Page Count Estimated Charge S25.00 DEC 05 2022 A. LUNT											
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Corporate Filing Menu

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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

(a)		(1	b)				
	Principal office address of limited liability of (Note: MUST BE STREET ADDRE.)		,	Δ	Aailing address of limited l (Note: MAY BE POST of		-
	10/00/2021			2100	0441022		
	10/08/2021 Date of filing/registration in Florio	da 4.	L	_Z100	0441023 Document number		
	• •	ua 4.			150c difficilit domoci		
(a)	ZENBUSINESS INC. Registered Agent and Registered Office shown on the	he records at the Florid	la f	Dent of State			
	336 E. COLLEGE AVE.	ne records of the Florid	J.1. L	Dept. of State	•		
		DA STREET ADDRES	S)				
	SUITE 301		,			~	
	TALLAHASSEE	FL 3230	1			2022 DEC	
(b)	Registered Agents Inc					:C -2	4 EF (1
(0)	Enter name of NEW Registered Agent and/or NEW	V Registered Office ac	ddı	ress:		<u> </u>	<u> </u>
	7901 4th St N					AM 11: 2	21 T
	NEW Registered Office Address:					7	
	STE 300	.,					
	St. Petersburg	, _{FL} 3370.	2				

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Rilun Park	Riley Park
Signature of a member or authorized representative of a member	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.

Bill Havre - Assistant Secretary