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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

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

\*\*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 **GRINER TAX SERVICES, LLC**

Certificate of Status	0		
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T. LEIMEUX

## 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.

1. Na	nne of the limited liability company: Griner Tax Service	s LLC		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Marling address of limite  (Note: MAY BE POS	d liability company;
3.	10/27/2021  Date of filing/registration in Florida		0466470 Document number	
5. (a)	GRINER, ISAAC Registered Agent and Registered Office shown on the records of the	e Florida Dept, o	í State	
	6825 bridlewood court Registered Office Address (MUST BE FLORIDA STREET AL	- <u>ODRESS)</u>		
	BOCA RATON	33433		
(b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered C			2823 Alic
	7901 4th St N		<del></del>	ري ري
	NEW Registered Office Address:			25
	S1E 300	<del>-</del> · · · · · · · · · · · · · · · · · · ·		A C
	St. Petersburg F1. 3	33702		2: 36
the cha agent v was/we the arti	imited liability company is not organized under the law; inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he registered on pility company the limited lia	office and the business of the desired the street of the street of the street of the s	ffice of the registered that the change(s)
Signa	ture of a member or authorized representative of a member	<u>Robin Jones</u>	Printed or typed name	of signce
provisi the obl to mere natitive	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I he f in writing of this change.	erformance of	Emy duties, and Lam Fan	uliar with and accept
na De	David Roberts - Assistant Sec	cretary		

Signature of Registered Agent