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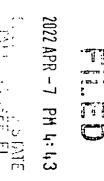
(Red	questor's Name)					
(Add	dress)					
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations	•
SUBJE	ECT: Magnolia Managemen Name of Limit	t Firm, all
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to	the following:
D	Name of Person	
_ma	ignoly Management Firm Pirm/Company	
32	1 N Dale Making Huy ste Address	<u>3</u>
Ta	mps , FL 3360 s City/State and Zip Code	
<u> In</u>	The Compage with Magnotice, Confimal address: (to be used for future annual report)	notification)
For fur	ther information concerning this matter, please call	:
<u>D</u>	name of Person	13) 924 - 0251 Area Code & Daytime Telephone Number
	Mailing Address:	Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Tarianassec, 11, 52514	Tallahassee, FL 32303
	Enclosed is a check for the following amount:	
\$25 Filing Fee		

INHS18 (2/14)

* 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	me of the limited liability company:	da 1	Nancyene	ot Firm	LLi	•		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)							
	STE 301							
	Tampa, FL 33609					···		
	11/09/2021			10004839	920			
3.	Date of filing/registration in Florida	4.		Document nur	nber			
5. (a)	Dalton Robinson Registered Agent and Registered Office shown on the records	s of the Flo	rida Dept. of Sta					
	- 0							
	Registered Office Address MUST BE FLORIDA STRE	<u>ET ADDRI</u>	ESS)		· 20			
	# 4Sel				2022 APR	स्याम्बर्		
	Tampa.	. FL <u>3</u>	13¢ II	- 	PR -7	4 <u>7</u>		
(b)	Silber Low Group C/O Enter name of NEW Registered Agent and/or NEW Register			_	7 PH 4: 4:		·	
	324 N. Date Maby Huy NEW Registered Office Address:	ş			ੱਜ ਹ			
	STE 300			_				
	Tampa.	, FL <u>3</u>	3360g	_				
change agent w was/we	mited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the memberles of organization or the operating agreement of	the regist d liability rs of the	ered office ar company, it l limited liabili d liability cor	nd the business of the business of the company or a mpany.	office of the of the of the office of the of	he registere he change(s se provided	ed s)	
1		_	Dalton	Printed or typed	<u>,</u>			
I herel provision the obli- to mere notified	ure of a member or authorized representative of a member by accept the appointment as registered agent and cons of all statutes relative to the proper and completed on the proper and completed of my position as registered agent as providing reflect a change in the registered office address, in writing of this change.	agree to a ete perfor ided for i , I hereby	act in this can	acity. I further	agree to c	comply with	the ecept filed en	
Signatur	e of Registered Agent							