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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

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## LLC REGISTERED AGENT CHANGE TSP GOLDEN CORRAL FL 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.

Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)
	\(\frac{1}{2}\)
10/00/01	L21000532228
12/22/21  Date of filing/registration in Florida 4.	Document number
Registered Agent and Registered Office shown on the records of the Flor  155 OFFICE PLAZA DR, 1ST F  Registered Office Address (MUST BE FLORIDA STREET ADDRE)  TALLAHASSEE FLORIDA STREET ADDRE	<u>[:ss)</u>
(b) Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office.	address: 23
7901 4th St N	1
NEW Registered Office Address: STE 300	
St. Petersburg33	702 <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>

Signature of a member or authorized representative of a member

Printed or typed name of signee

The other part of the 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.

্রিপার নির্বাহিত David Roberts - Assistant Secretary

Signature of Registered Agent