Division of Corporations

Note: Please printellas page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000353925 3)))



H230003539253ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

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 DIGITAL PRODUCT PUBLISHING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu —

HelpT 10 Land

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.

(a)		ı b i	
. (4)	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12/22/21	L2200	00001711
•	Date of filing/registration in Florida	4.	Document number
(a)	NORTHWEST REGISTERED AGENT LLC		
147	Registered Agent and Registered Office shown on the records of		
	7901 4TH ST N		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	STE 300		
	CT DETERMINE	22702	
	ST. PETERSBURG , FI	33702	
	Registered Agents Inc		25.00
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	7901 4th St N		Sur ·
	NEW Registered Office Address:		
	STE 300		- -
			59
	St. Petersburg	33702	
e cha ent w as/we e arti	mited liability company is not organized under the la nge or changes are made, the Florida street address o rill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the State f the registered jability compar of the limited I	I office and the business office of the register ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company.
Signat	me of a member or authorized representative of a member		Printed or typed name of signee
herel	by accept the appointment as registered agent and ac	ree to act in th	is capacity. I further agree to comply with a
ovisii e obli mere	y accept me appoinment as registered agent and agons of all statutes relative to the proper and complete gations 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 in performance of d for in Chapt hereby confirm	is capacity. I juriner agree to comply with of my duties, and I am familiar with and according for 605, F.S. Or, if this document is being for that the limited liability company has been

- Assistant Secretary

David Roberts