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10L 20 2023 T. LEMIEUX

To:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

16144554862

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	ame of the limited liability company:	DIA, LLC	
2. (a)	174 WATERCOLOR WAY, SUITE 103-232	(b) P(O Box 25096
-· (-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(")	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SANTA ROSA BEACH, FL 32459	<u></u>	ashington, DC 20027
	01/07/2022	 L22	.000006498
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	EUGENE PHILLIP STUTTS		
	Registered Agent and Registered Office shown on the records of	the Fiorida Dep	or, of State:
	712 SERENOA ROAD		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	
	SANTA ROSA BEACH , FL	32459	
(b)	C T Corporation System		2023 G
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address	
			ू इ
	NEW Registered Office Address:		- <u> </u>
	1200 South Pine Island Road		
	Plantation , FL	33324	
he cha igent w vas/we he arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited list attended by an affirmative vote of the members of cles of organization or the operating agreement of the becca Conta	the registere ability compa of the limited limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
	tire of a member or authorized representative of a member	Rebecca	Printed or typed name of signee
I herel provisi he obli o mere	by accept the appointment as registered agent and aground on sof all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I if in writing of this change. CT Corporation System	a for in Chap hereby confir -	his capacity. I further agree to comply with the