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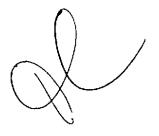
(Requestor's Name)
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 629 Whitney Dri Name of Limite	ve LLC ed Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to	the following:			
Cameron Colbert Name of Person				
1029 Whitney Dave LLC-Firm/Company				
1150 Old Nursey Way Address	2022 AUG 26			
Penjacola, FL 32514 City/State and Zip Code				
Carrerangichardcolbert Ogmail. Co E-mail address: (to be used for future annual report)	notification)			
For further information concerning this matter, please call	l:			
Cameron Colbert at S	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amount:				
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

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. N	ame of the limited liability company:	nitney.	Drive LC			
2. (a)		(b)	1150 Old Nu Mailing address of	Mailing address of limited flability company: (Note: MAY BE POST OFFICE BOX)		
	Pensarola, FL 32514		Pensacola, F	L .33	<u>514</u> ——	
3.	Date of filing/registration in Florida	4.	Document nun	ber		
5. (a)	Registered Agent and Registered Office shown on the records of the Hags Lavallet Circle Registered Office Address (MUST BE FLORIDA STREET A	· · · · · · · · · · · · · · · · · · ·	n, of State:			
(b)	Pensacola , FL Cameron (olbert Enter name of NEW Registered Agent and/or NEW Registered G 1150 Old Nursery Way NEW Registered Office Address:	3250			2022 AUG 26 PM 4: 10	
	Penjacola FL	32514	 			
change agent was/w the art	imited liability company is not organized under the laws or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabete of a member or authorized representative of a member	registered of bility compa Tthe limited	ffice and the business only, it is hereby confirmation or as liability company or as	office of the transfer of the	the reg the cha ise pro	gistered ange(s)
provis the obi to mer notifie	hy accept the appointment as registered agent and agre ions 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 d in writing of this change.	e to act in therformance for in Chap ereby confir	his capacity. I further of my duties, and I am ner 605, F.S. Or, if thi m that the limited liabi	agree to familiar s docume lity comp	compl with a nt is h cany h	ly with the and accept being filed as been