Florida Department of State Division of Corporations Elegtronic Biling Cover Street

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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

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:					
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LLC REGISTERED AGENT CHANGE **VOYAGE ELITE, LLC.**

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Help

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.

l.	Na	me of the limited liability company: Voya	ge Eliti	e, LLC.			
2. ((a)			(b)			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		7901 4th St N STE 300		7901	4th St N STE 300		
		St. Petersburg FL		St. Pet	tersburg FL 33702		
		01/07/22		L220	00016283		
3.		Date of filing/registration in Florida	4	***************************************	Document number		
5.	(a)	PICKETT, KRISTINE D					
	()	Registered Agent and Registered Office shown on the red	cords of the Flo	orida Dept, of S	tate:		
		1145 EVEREST RD					
		Registered Office Address (MUST BE FLORIDA ST	<u>FREET ADDR</u>	ESS)			
		VENICE	342	293	2022 J		
(Registered Agents Inc.				F/12 1022 JUL 21		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	_ <u>_</u>				
		7901 4th St N			PH ()		
		NEW Registered Office Address:			36		
		STE 300					
		St. Petersburg	, _{FL} 337	702			
the age was	cha nt v /we	imited liability company is not organized underinge or changes are made, the Florida street addivil be identical. Or, in the case of a Florida linere authorized by an affirmative vote of the mercles of organization or the operating agreement	lress of the inited liability in the liability in the limit of the limit	egistered off y company, i limited liabi ed liability c	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.		
	_	Riley tak.		Riley Parl			
	_	ure of a member or authorized representative of a member		and to able a	Printed or typed name of signee		
pro the to n	visi obl nere	by accept the appointment as registered agent of ons of all statutes relative to the proper and co- igations of my position as registered agent as party reflect a change in the registered office add in writing of this change. Bill Havre - As	and agree to implete perforovided for ress, I herel sistant Se	ormance of m in Chapter 6 by confirm the	apacity. I jurther agree to comply with the my duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been		

Signature of Registered Agent