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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

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## LLC REGISTERED AGENT CHANGE MINEGLOBAL 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

(a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	01/21/2022		22000024732
	Date of filing/registration in Florida	4,	Document number
(a)	ALONSO & GARCIA, P.A.		
(4)	Registered Agent and Registered Office shown on the rec	nt, of State:	
	5805 BLUE LAGOON DR., STE.	200	
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)	<del></del>
	MIAMI	, <sub>FL</sub> _33126	2022 HAY 16
(b)	Northwest Registered Age	ent LLC	
(0)	Enter name of NEW Registered Agent and/or NEW Re		
	7901 4th St N		
	NEW Registered Office Address:		·· w
	STE 300		
		FL_33702	

Morgan Poller	Morgan Noble
Signature of a member or authorized representative of a member	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 my filed in viring of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent