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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

To 18506176383

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.

Na	une of the limited liability company:		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	02/02/2022	L220	00056819
	Date of filing/registration in Florida	4.	Document number
(a)	ZENBUSINESS INC.		
. (,	Registered Agent and Registered Office shown on the records of t		
	336 E. COLLEGE AVE.		202 SE T
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2024 JAN 26 SECRICIANA TALLAHA
	SUITE 301		JAN 26 PH
	TALLAHASSEE	32301	ASSE PI
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	Office address:	
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg, FL	33702	
cha ent w s/we arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized epresentative of a member.	the registered ability compa of the limited	d office and the business office of the registe ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
ierel ovisi obli mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have the provided of this change in the registered office address. I have	ce to act in the performance I for in Chap tereby confir	Printed or typed name of signee his capacity. I farther agree to comply with to of my duties, and I am familiar with and acc ter 605, F.S. Or, if this document is being fil m that the limited liability company has been

Signature of Registered Agent

David Roberts

- Assistant Secretary