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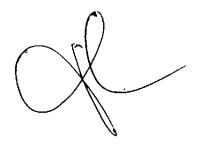
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COVER LETTER

	ration Section on of Corporations			
SUBJECT: _	ython Insurance, LLC			
		Name of Limited	Liability Company	
Dear Sir or Ma	dam:			
The enclosed R	egistered Agent/Registered	Office Change an	d fee(s) are submitted for filing.	
Please return al	l correspondence concernir	ng this matter to the	e following:	
Gideon I. Alper	r, Esq.			
	Name of Person			
Alper Law, PLL	_C			
	Firm/Company		_ _	20
255 Primera Blvd., Suite 160			<u>.</u>	23 APF
· · · · · · · · · · · · · · · · · · ·	Address			\tilde{z}
Lake Mary, FL	32746			APR III PH 2
	City/State and Zip Co	de	_	2023 APR 11 PM 2: 42
E-mail ad	dress: (to be used for future	e annual report not		
For further info	rmation concerning this ma	atter, please call:		
Jackie Royal, F	Paralegal	407 at (444-0404	
	Name of Person		Area Code & Daytime Telephone N	umber
Regist Divisio P.O. B	ng Address: ration Section on of Corporations ox 6327 assec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 819 Tallahassee, FL 32303	0
Enclos	ed is a check for the follow	wing 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.

l. (a)		(b)	
	Principal office address of limited liability compare (Note: MUST BE STREET ADDRESS)	ny:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	105 22nd St W	10:	5 22nd St W
	Bradenton, FL 34205	Bra	adenton, FL 34205
	02/22/2022	1 220	000095361
} <u>.</u>	Date of filing/registration in Florida	4.	Document number
5. (a)			
(41)	Registered Agent and Registered Office shown on the rec	ords of the Florida Dept	t. of State:
	Jacquelyn L. Levine		
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)	
	105 22nd Street W		~>
	Bradenton	E. 34205	2023 APR 1 1
		, FL	PR
(b)			
(0)	Enter name of NEW Registered Agent and/or NEW Reg	gistered Office address	
			The Roy D
	Alper Trustees, LLC		2: t 2
	NEW Registered Office Address:		, •
	255 Primera Blvd., Suite 160		
	Lake Mary	32746	
hange gent v vas/wo	imited liability company is not organized under e or changes are made, the Florida street address will be identical. Or, in the case of a Florida lime ere authorized by an affirmative vote of the menticles of organization or the operating agreement	of the registered of ited liability compa ibers of the limited of the limited liabil	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
	and the minimum or annihilation representative or a member		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent

As -