Florida Department of State Divisional Conformations

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To:

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 PRIME INVESTMENT GROUP OF PALM BEACH LLC

| Certificate of Status | 0 | | |
|-----------------------|---------|--|--|
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AUG 17 2022 K. Brumbley

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

| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | 7 | failing address of limited | hability com | กลทง |
|-----|---|----------------|----------------|----------------------------|--------------------------|------|
| | | | | (Note: MAY BE POST | | |
| 02 | 2/28/22 | | | 0102996 | | |
| | Date of filing/registration in Florida | 4. | | Document number | | |
| | HOAF, CARSON T | | | | | |
| Reg | gistered Agent and Registered Office shown on the records of | of the Florida | Dept. of State | : | | |
| 5 | 756 BRAVEHEART WAY | | | | | |
| | egistered Office Address (MUST BE FLORIDA STREE) ALLAHASSEE | | | _ | ~ ~ | |
| | ALLAHASSEE Iorthwest Registered Agent | | | ALI AHA | ZOZZ AUG , SE OKE I / | |
| Ent | ter name of NEW Registered Agent and/ot NEW Register | ed Office ad | dress: | 5 | ₹ 5 | |
| 7 | 7901 4th St N | | | E. FL(| P# 3 | |
| NF | EW Registered Office Address: | | |)R(| 3: 37 TAIE | |
| S | STE 300 | | | | 7 | |
| | St. Petersburg | 33702 | 2 | | | |

| Morgan Polle | 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 fied in writing of this change.

Tlove Tom Glover - Assistant Secretary

Signature of Registered Agent