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## LLC REGISTERED AGENT CHANGE TRIPLE THREAT TRAVEL, LLC

| Certificate of Status | 0       |
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M. SOLOMON MAR 2 2 2024

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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.

| 1. Na                                     | ame of the limited liability company: TRIPLE THRE  | AT TRA  | VEL, LLC  |  |  |   |
|---|--|---|---|--|--|---|
| 2. (a)                                    |  |   | (b)   |  |  |   |
|   | Principal office address of limited liability company:<br>(Note: MUST BE STREET ADDRESS)   | <del></del>                                       | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 189 S. ORANGE AVENUE, SUITE 1170 |  |  | npany:  |
|   | 189 S. ORANGE AVENUE, SUITE 1170   |   |   |  |  |   |
|   | ORLANDO, FL 32801 ORLANDO, FL 32801  |   |   |  |  |   |
|   | 04/28/2022   |   | 1,2200017   | 5480   |  |   |
| 3.  | Date of filing/registration in Florida   | 4.  |   | Document number  | -  |   |
| 5. (a)                                    | McCraney, Steven E   |   |   |  |  |   |
| J. (4)                                    | Registered Agent and Registered Office shown on the records of   | of the Flor                                       | ida Dept. of St   | ate:   |  |   |
|   | Registered Office Address (MUST BE FLORIDA STREE   | T ADDRE   | <u>SS)</u>  | <u></u>  |  |   |
|   | 189 S. ORANGE AVENUE, SUITE 117  |   |   |  | . •  | <b>~</b> 3                                    |
|   | ORLANDO, F   | 32801   |   |  | Ţ.;  | 024   |
| (0)                                       | orporate Creations Network Inc.  nter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office addr</u>   |   |   | _  | 2024 MAR 22 AM 10: 2   | MAR 22 AM 10: 20                              |
|   | NEW Registered Office Address:   |   |   | <del>_</del>   | 22 (Sept.  | : 2(  |
|   | 801 US Highway 1   |   |   | _  |  |   |
|   | North Palm Beach, F  | -L_33408  |   |  |  |   |
| change<br>agent v<br>was/wo               | imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited last authorized by an affirmative vote of the members cles of organization or the operating agreement of the | ne registe<br>liability of<br>of the li           | red office a<br>company, it<br>mited liabil   | nd the business offic<br>is hereby confirmed<br>ity company or as off                                  | e of the regi-<br>that the char                              | stered<br>nge(s)                              |
| $\sim$ .                                  | / /  |   |   | tomey-in-Fact  |  |   |
| Signal                                    | ture of a member or authorized representative of a member  |   |   | Printed or typed name  | of signee  |   |
| provisi<br>the obl<br>to mero<br>notified | by accept the appointment as registered agent and ay ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address. If in writing of this change.                                | gree to a<br>le perfori<br>led för in<br>l hereby | ct in this cap<br>nance of my<br>Chapter 60<br>confirm that   | pacity. I further agre<br>e duties, and I am Jan<br>15, F.S. Or, if this do<br>e the limited liability | ee to comply<br>uiliar with a<br>ocument is be<br>company ha | with the<br>nd accept<br>ring filed<br>s been |
| Ind                                       | Jade Lopez, Special Secretary  |   |   |  |  |   |

Figuature of Registered Agent