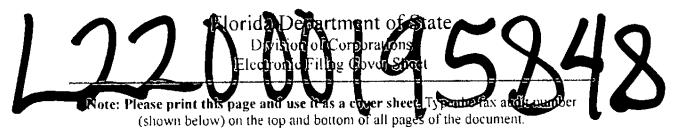
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Division of Corporations



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M. SOLOMON

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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.

l. N	ame of the limited liability company: Fontana Ventures,	LLC			
2. (a)	180 PARK AVE NORTH SUITE 2A	(b	1	CAVE NORTH SUITE 2	
() .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	WINTER PARK, FL 32789	_	WINTER	PARK, FL 32789	
	04/25/2022		L22000195	848	
3.	Date of filing/registration in Florida TUCKER H BYRD	4.		Document number	
5. (a) (b)	Registered Agent and Registered Office shown on the records of the Florida Dept, of State:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 180 PARK AVE NORTH SUITE 2A		_	2322 U	
	WINTER PARK , FL	32789		-	1.45 16
	C T Corporation System	•			rich Pr
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		-	2:49	
	NEW Registered Office Address:			_	
	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·		_	
	Plantation , FL	33324			
the chagent was/v	limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lievere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	vs of the the reginability confitted if the limited	stered offic ompany, it nited liabili liability co	te and the business offi is hereby confurned that ty company or as other	ce of the registered at the change(s)
	Just 4 Byl	Tuc	ker H. Hyrd	Diam's and an of	
I her provi- the of to me notifl By:	Sture of a member or authorized representative of a member show accept the appointment as registered agent and agrishes of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I is ed in writing of this change. CT Corporation System /s/Stephanie Hencz.	ee to ac perform d for in hereby c	t in this cup ance of my Chapter 60 confirm that	Printed or typed name of pacity. I further agree of duties, and I am family 5, F.S. Or, if this docust the limited liability co	