Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 : (307)200-2803 Phone Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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LLC REGISTERED AGENT CHANGE HORDLY DAVE VILNEUS LLC

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Fax: 8134365206

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 5

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

. N	ame of the limited liability company: HORDLY DAVE		
. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	04/27/22	L2200	0200986
	Date of filing/registration in Florida	4.	Document number
. (ล์	VILNEUS, HORDLY D		
. (ล	Registered Agent and Registered Office shown on the records of	of the Florida Dept. o	of State:
	7901 4th St N	,	
	Registered Office Address (MUST BE FLORIDA STREET		
	Ste 300		
	St. Petersburg	1_33702	
	Northwest Registered Agent LLC		~
(b)		2024 (152)	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	E	
	7901 4th St N		:
	NEW Registered Office Address:		
	STE 300		7
			 ;
	St. Petersburg	33702 1	~3
e chagent as/was/was art	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ideas of organization or the operating agreement of the florida member of a member or authorized representative of a member or authorized representative of a member or authorized tepresentative of a member of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address.	of the registered liability company of the limited line limited liability Nat Smith	office and the business office of the register y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company. Printed or typed name of signee s canacity. I further agree to comply with the

Assistant Secretary

Taylor Newman

Signature of Registered Agent