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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE ADVENTURES ASSEMBLED TRAVEL CO LLC

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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. No	ame of the limited liability company. ADVENTURES	ASSEMBLE	D TRAVEL	COLLC	
2. (a)		(h)		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mading address of limited hability company; (Note: MAY BE POST OFFICE BOX)		
	7901 4th St N STE 300		7901 4th S	t N STE 300	
	St. Petersburg FL 33702		St. Petersburg FL 33702		
	05/02/22	1	L220002083	43	
3.	Date of filing/registration in Florida	-4,		Document number	
5. (a)	ROCKET LAWYER CORPORATE SERVICES LLC				
	Registered Agent and Registered Office shown on the records of	t the Fiorida	Dept. of State	•	
	155 OFFICE PLAZA DRIVE				
	Registered Office Address	ADDRESS)	•		
	1ST FLOOR			13.00 23 1	
	TALLAHASSEE . F	L_32301		2025 FEB	
(b)	Northwest Registered Agent LLC			B -5 F	
107	Enter name of NEW Registered Agent and or NEW Registered	d Office add	Fess:	AM D	
	7901 4th St N			<u>කු</u> සු ලකු ය	
	NEW Registered Office Address:			n Sin	
	STE 300			· -	
	St. Petersburg	33702			
the cha agent v was/we the arti	imited liability company is not organized under the la unge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist iability cor of the luni	tered office npany, it is ted liability	and the business office of the registered thereby confirmed that the change(s) yeompany or as otherwise provided in	
	ture of a member or authorized representative of a member			Nat Smith	
				Ponted or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and ageons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address. It is writing of this change.	e performa ed för in C Thereby co	in this cape nce of my e hapter 605, nfirm that i	icity. I further agree to comply with the luties, and I am Jamiliar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
Signatu	d'in writing of this change. Taylor Newman - Assistant S re of Registered Agent	Secretary			