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Division of Corporations Fax Number : (850)617-6383

From:

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

		Email	Address:		-R 20
			LLC REGISTERED AGENT CHANGE CEDAR'S EDGE LLC		AH 10: 54
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			Estimated Charge	\$25.00	

K. Brumbiey

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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.

(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)		
_	2508 Formosa Ave	2508 Formosa Ave Orlando FL 32804					
-	Orlando FL 32804						
C)5/24/22		L220	00241756	5		
	Date of filing/registration in Florida	4.		Document nun	nber		
(a)	ZENBUSINESS INC.						
-			-				
-	Registered Office Address (MUST BE FLORIDA STREET 336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE	<u>ADDRE:</u> [3230				2023 APR 21	F II
- - b) <u>F</u>	336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE F	1 <u>, 323(</u>)1			20	FIL
- - b) <u>F</u>	336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE F Registered Agents Inc	1 <u>, 323(</u>)1			20 AH 10:	FIL. 5
- - (b) <u>F</u> -	336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE F Registered Agents Inc	1 <u>, 323(</u>)1			20 AH	FIL, 1
(b) <u>F</u> E	336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE F Registered Agents Inc Inter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	1 <u>, 323(</u>)1			20 AH 10:	FIL, 1

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

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Signature of a member or authorized representative of a member

ROBIN JONES 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 notified in writing of this change. avia coerts

David Roberts	-	Assistant	Secretary	V
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Signature of Registered Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314