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## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

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COUNTRY OF DESTIN NUMBER OF CERTIFI	NATION	"/ NOTARIAL CERTIFICATION**
NUMBER OF CERTIFI	CATICS REQUESTED	
TOTAL OWED \$ 25.	00	ACCOUNT # I20140000108 / United Corporate Services, Inc.

## 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)	7593 W. BOYNTON BEACH BLVD., SUITE 220 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)		
	BOYNTON BEACH, FL 33437	_	BOYNT	TON BEACH, FL 33437	
		_		050610	
•	06/01/2022  Date of filing/registration in Florida	- 4.	L220002	Document number	
•	• •	٦,			
. (a)	Beverly Archer Registered Agent and Registered Office shown on the records of	the Florid	Dept. of Sta	nte:	
	7593 W. BOYNTON BEACH BLVD., SUITE		•		
	Registered Office Address (MUST BE FLORIDA STREET		<u></u>		
	<del></del>			2025 . Tàll	
	BOYNTON BEACH , FI	3343	7	FILED 2025 JAN-3 PM 2: 51 TÄLLÄHASSEE FLÖRIDA	
41.5	United Corporate Services, Inc.				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ac	dress:	- 7.00 PLOS	
	3458 Lakeshore Drive			51 Rilba	
	NEW Registered Office Address:	-		<del></del>	
	Tallahassee . FI	32312	<u>,                                      </u>	_	
hang gent /as/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the register ability co	ed office a ompany, it nited liabili	is hereby confirmed that the change(s) ity company or as otherwise provided in	
/s/ Claudia Honan, Esq.			Claudia Honan, Esq.		
	ature of a member or authorized representative of a member			Printed or typed name of signee	
rovis he ob o mei	eby accept the appointment as registered agent and agi sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ged in writing of this change.	perjorn d for in t	ance oj my Shanter 60	saunes, and ram jumitias with this decept 15 FS Or, if this document is being filed	
y.ı	Michael A. Barr, President				

Signature of Registered Agent