## Florida Department of Division of Coro L221

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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Email Address:

## LLC REGISTERED AGENT CHANGE **BIZZ BEE 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

1. Nam 2. (a)	ne of the limited liability company: BIZZ BEE		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)					
_	7901 4th St N STE 300	·	7901 4th St N STE 300				
<u>;</u>	St. Petersburg FL 33702	-	St. Peter	sburg FL 33702			
O	06/01/2022		L22000	0251859			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a) <u></u>	HORDLY, VILNEUS						
	Registered Agent and Registered Office shown on the records of the	re Flori	la Dept. of State	:			
2	2054 VISTA PARKWAY						
R	Registered Office Address (MUST BE FLORIDA STREET A)	DDRES	<u>(S)</u>				
:	SUITE 400			- -	<u>Z</u> ¥.	202:	
	WEST PALM BEACH . FL	3341	1			2022 AUG	7
(b) N	Northwest Registered Agent L	LC				30	FILE AND AND
• • • —	inter name of NEW Registered Agent and/or NEW Registered C	Office a	ddress:	• •	11 000 T	T C	ָרָרָ רַרָּ
-	7901 4th St N			- - - - - -		1: 56	_
2	NEW Registered Office Address:						
	STE 300						
•	St. Petersburg, FL	3370	2				
he chang agent wil was/were	nited liability company is not organized under the law ge or changes are made, the Florida street address of t If be identical. Or, in the case of a Florida limited lial e authorized by an affirmative vote of the members of les of organization or the operating agreement of the l	the reg bility ( the li	istered office company, it is nited liability	and the business of hereby confirmed company or as oth	ffice of that the	f the re e chan	egistered ge(s)
	re of a member or authorized representative of a member		organ Not				
Signatur	re of a member or authorized representative of a member			Printed or typed name	of signe	e	

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 i<del>ed i</del>n writing of this change.

Tom Glover - Assistant Secretary

Signature of a member or authorized representative of a member

Signature of Registered Agent