Florida Department of State= Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number

: (813)436-5206

the email address for this business entity to be used for future in address please.**

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LLC REGISTERED AGENT CHANGE ALL THINGS WE LOVE 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.	Na	me of the limited liability company: ALL THINGS	WE LO	OVE LLC	
2. (a	1)	Principal office address of limited liability company:	(i	p)	Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
3.		06/06/2022 Date of filing/registration in Florida	 - 4.	L220002	57501 Document number
5. (a)	UNITED STATES CORPORATION AGENTS			
		Registered Agent and Registered Office shown on the records of t	the Florida	a Dept, of State	¢:
		476 RIVERSIDE AVE.			-
		Registered Office Address (MUST BE FLORIDA STREET A	ADDKESS	<u>57</u>	
					-
		JACKSONVILLE . FL	32202	<u> </u>	⊊ 202
					APPRO FILI SECRETAR TALLARISS
(b)	Registered Agents Inc			
		Enter name of NEW Registered Agent and/or NEW Registered	AND FILED ARY OF		
		7901 4th St N			PH 12: 51
		NEW Registered Office Address:			<u>ਛੋ≥ ਲ</u> ੱ
		STE 300			· · · · · · · · · · · · · · · · · · ·
		St. Petersburg , FL	3370	2	_
the clagent was/the a	ha: t w we rtic	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi ability co of the lin	stered office ompany, it is nited liability	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
<u> </u>	٠٠٠٠ إ	ure of a member or authorized representative of a member	Robin Jones		
					Printed or typed name of signee
provi the o to me	isie bli ere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the properties of this change.	ee to ac perform d for in t hereby c	t in this cape ance of my e Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
1)4	(Vic	The David Roberts - Assistant Secretar	v		

Signature of Registered Agent