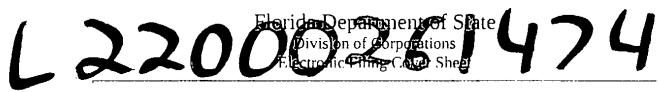
Division of Corporations



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To:

Division of Corporations

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: (850)617-6383

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 R&L MARKETING INVESTMENT LLC

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1/1

.2/13/2023 13:16:20 PST+ To: 18506176383 Page: 2/2 From: Registered Agents Inc Fax: 8134365206

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:	ING INVESTMEN	NT LLC
2. (a)		(b)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	06/08/22	L22	000261474
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	POLANCO, ROBERTO		
J. (u)	Registered Agent and Registered Office shown on the records	of the Florida Dep	nt, of State:
	13217 LAKE YALE VIEW LOOP		
	Registered Office Address (MUST BE FLORIDA STREE	2	
	GRAND ISLAND	FL_32735	
(b)	Registered Agents Inc		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addres	=
	7901 4th St N		n .>
	NEW Registered Office Address:	-	
	STE 300		
	St. Petersburg	33702 FL	
the cha agent v was/wo the arti	limited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the street of the str	of the registered liability computes of the limited he limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company.
Sinna	Productive forming ture of a member or authorized representative of a member	Robin Jo	Printed or typed name of signee
I herei provisi the obl to mere natified	by accept the appointment as registered agent and cons of all statutes relative to the proper and completing to the proper and completing agent as providing the registered agent as providing the registered office address. If in writing of this change.	ete performance ded for in Chap I hereby confi	this canacity. I further agree to comply with the
Signatu	David Roberts - Assistant	t Secretary	