## L22000286730

(Re	questor's Name)						
(Address)							
(Ad	dress)						
(Cit	y/State/Zip/Phone	e #)					
PICK-UP	☐ WAIT	MAIL					
(Bu	siness Entity Nar	ne)					
(50	omoso Emily rvar	,					
	cument Number)						
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	O 100						
Certified Copies	_ Certificates	s of Status					
Special Instructions to	Filing Officer:						

Office Use Only



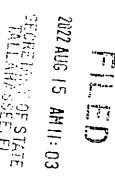
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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. N	ame of the limited liability company:  BEYOND INTEC					IO I ANDRI					
2. (a)	1944 JUNO LANDING LANE  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			)		JUNO LANDING LANE  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)					
	NORTH PALM BEACH, FL 33408	_		NOR	тн Р	ALM BEAC	CH, FL	33408	·		
	06/24/2022			L2200	0286	730					
3.	Date of filing/registration in Florida	4.	•	•		Document	numb	er			
5. (a	Universal Registered Agents, Inc.										
	Registered Agent and Registered Office shown on the records of 4545 WEST 110TH STREET	the Flo	rida	Dept.	of Stat	te:					
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS	2		_					
	OVERLAND PARK , FI	66211	1			<del>-</del>		- (2) (1)	2027		
(b)	Universal Registered Agents, Inc.							CREI	2022 AUG	E 1	
	Enter name of NEW Registered Agent and/or NEW Registered	Office	ad	dress:				7:	5	i Indiana	
	1317 California Street.  NEW Registered Office Address:					_		SOF S	H		
				-		_		STATE FI	AH 11: 03		
	Tallahassee , FI	3230	4								
chang agent was/v	limited liability company is not organized under the lave 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	regist ability of the	co lim	ed offi mpan ited l	ce an y, it i abilit	nd the busing is hereby co ty company	ess off	fice of the	e regis e chan	tered ge(s)	
Sign	Signature of a member or authorized representative of a member					Printed or typed name of signee					
provi the ol to me	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I all in writings of this change.	ree to perfo d for i hereby	act rma in C	in thi ince o hapte infirm	s cap of my er 60: that	pacity. I furn duties, and 5, F.S. Or, the limited	ther as I am f if this liabili	gree to c amiliar documen ty compo	omply with an it is be any has	with the d accept ing filed been	
<u></u>	ure of Registered Agent										