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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for tuture annual report mailings. Enter only one email address please.\*\*

m.a	i	1	Address	

## LLC REGISTERED AGENT CHANGE LARRY LAWN CARE LLC

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K. SALY
JUL 1 8 2024



## 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.

2. (a)	(a) 1894 Pruitt Street		1894 Pruitt Street		
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Leesburg, Ft. 34748	Le	resburg, FL 34748		
	06/30/2022	1,22	2000294887		
. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.	Document number		
/	Registered Agent and Registered Office shown on the records 476 Riverside Ave.	of the Florida De			
	Registered Office Address (MUST RE FLORIDA STREE	ET ADDRESS)			
	Jacksonville	FL_32202	JUL 17		
(b)	Corporate Creations Network Inc.				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 801 US Highway 1	<u>red Office addres</u>	TALL LANASSITE AT MAIL		
	NEW Registered Office Address:		<del></del>		
	North Palm Beach	FL_33408			
hange gent w as/we	imited liability company is not organized under the or changes are made, the Florida street address of t 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 member of the operating agreement of the	he registered of liability comparison of the limited	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		
	Kristen Espinales	Kristen	Espinales, Attorney-in-Fact		
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee		
rovisia ic obli i mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi by reflect a change in the registered office address, I'in writing of this change.	igree to act in t te performance ded for in Chaj I hereby confi	this capacity. I further agree to comply with the c of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been		

Kristen Espinales, Special Secretary

Kristen Espinales

Signature of Registered Agent