## Florida Department of State Electionic Filing Cov

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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 : (855)330-1010

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

C 1	Addrass			

## LLC REGISTERED AGENT CHANGE **DLCPROMOTION 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.

i. 8	ame of the limited liability company: DLCPROMOTIO	N LLC				
2. (a)		(b)				
,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	07/05/22	 L22000	0300803			
3.	Date of filing/registration in Florida	4,	Document number			
5. (a	NORTHWEST REGISTERED AGENT LLC					
2. (4,	Registered Agent and Registered Office shown on the records of 7901 4TH ST N	f State:				
	Registered Office Address (MUST BE FLORIDA STREET)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	STE 300	<u></u>				
	ST. PETERSBURG	33702	2			
(b)	Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered  7901 4th St N	2023 H. Y 30 P				
	NEW Registered Office Address:					
	STE 300		57			
	St. Pelersburg, FI	33702	·			
the ch agent was/w the ar	limited liability company is not organized under the larange or changes are made, the Florida street address of 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	f the registered of ability company of the limited lia	office and the business office of the registered to it is hereby confirmed that the change(s) ability company or as otherwise provided in the company.			
Sien	ature of a member or authorized representative of a member	RODIII JONES	Printed or typed name of signee			
I here provis the ob to me	by accept the appointment as registered agent and agitions of all statutes relative to the proper and complete digations of my position as registered agent as provide to the file of a change in the registered office address, I dig myriting of this change.	e performance of ed for in Chapte, hereby confirm	canacity. I further agree to comply with the			
Signat	ure of Registered Agent	,				