## 2000320006

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(Requestor's Name)					
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PICK-UP	MAIT	MAIL			
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
For any issues please contact
Cheyanne Davis
(850) 202-1882

Date:	08/20/2024	(850) 202-1882				
	Cheyanne Davis					
Reference #	2464103					
		ASSET HOLDINGS, LLC				
_	•	rization to Transact Business				
Ame	ndment					
	nge of Agent					
Rein	statement					
☐ Conv	Conversion					
☐ Merg	er					
☐ Dissolution/Withdrawal						
☐ Fictit	ious Name					
Othe	r					
Authorized A	Amount: <b>\$25.0</b> 0	0				
Signature:	<b>[八叫咖啡水亭一</b>					

F: 800.944.6607

F: +852.2682.9790

## 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:	GI	RID ASSET	HOLDINGS, LLC
2. (a)	no change	_ (b	)	no change
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	7/18/2022	_		L22000320006
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	REDDEN, DAVID H Registered Agent and Registered Office shown on the records of the			_
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET A.)			:: -
	11600 NINTH ST N			202 TÀ
	ST. PETERSBURG , FL_	3:	3716	A AUG
(b)	Cogency Global Inc.  Enter name of NEW Registered Agent and/or NEW Registered Office address:			2024 AUG 20 PH 12: 32 TÄLLAHÄSSEE, FLORIDA
	115 North Calhoun Street, Suite 4			2: 3 ORI
	NEW Registered Office Address:			n Z
	Tallahassee , FL	3:	2301	-
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the lim	stered office ompany, it i lited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	/s/ David Redden			David Redden
-	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h d'in writing of this change.	ee to act perform for in C ereby co	in this cap ance of my Chapter 602 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

/s/ Michael Carlisle

Signature of Registered Agent

Michael Carlisle, Assistant Secretary