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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 121652
REFERENCE : 121652 8432490 AUTHORIZATION :
COST LIMIT : \$ 25.00
ORDER DATE: November 8, 2023
ORDER TIME : 7:20 AM
ORDER NO. : 121652-005
CUSTOMER NO: 8432490
CHANGE OF AGENT
NAME: CPF MIB, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland-sorenson EXT#

EXAMINER:

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. N	ame of the limited liability company: CPF MIB, LLC		
2 (a)		(b)	
(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)
	7901 4TH ST N STE 300	7901 4TF	ST N STE 300
	ST. PETERSBURG, FL 33702	ST. PETE	ERSBURG, FL 33702
	08/22/2022	L22000368	3337
3.	Date of filing/registration in Florida	4.	Document number
- , .	<u>-</u> -		~ >
5. (a)	Registered Agent and Registered Office shown on the records o		7072
	REGISTERED AGENTS INC	· me · maa » sp. « · saa	2023 (1.57
	Registered Office Address (MUST BE FLORIDA STREET	"ADDRESS)	1
	7901 4TH ST N 300		, , , , , , , , , , , , , , , , , , ,
,	ST. PETERSBURG	33702	- ှိ
	F	L	- -
/b)			
(b)	Enter name of NEW Registered Agent and/or NEW Registere		-
	Corporation Service Company		_
	NEW Registered Office Address:		
	1201 Hays Street		_
	Tallahassee	32301	
	,	.,	-
change agent v was/we	imited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered office and lability company, it is of the limited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
	/s/ Kevin Preskenis	Kevin Preskeni	s, Authorized Person
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	ree to act in this capa e performance of my c ed for in Chapter 605 hereby confirm that i	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
	/s/ Grace E. Kirby	Grace E. Kirb	y. Asst Vice President
Signatu	re of Registered Agent		