Division of Corporations

Florida Department of S

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000340120 3)))



H230003401203A5/CP

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PARASEC Account Number : I20180000086

Phone : (916)576-7000 Fax Number : (800)603-5868

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

mail	Address:	

LLC REGISTERED AGENT CHANGE WORKING WEALTH ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

SEP 28 2023

K. Brumbley

- To: 18506176383 From: 19165767049 Date: 09/27/23 Time: 6:43 FM Page: 03/03

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMBTED LIABILITY COMPANY . .

Pursuant to the provisions of sections 605 0114 or 605 0116, Florida Statutes, we 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	WORKING WLA lame of the limited hability company:	T TH UNTURPRIS	ESTEC		
2 (a)	Principal office address at limited liability company: (Note: MEST BE STREET ADDRESS)	(b) Mulling address of lunted liability company (Note: MAY BE POST OFFICE BOX)			
	TOD IN TAILURY DELICION		ENSACOLA, FL 32502		
	PENSACOLA, FL. 32502	T. C.			
	09/09/2022	1,220003	95612		
3.	Date of filing/registration in Florida	4,	Document number		
5. (a)					
	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:		
	LINDSAY, TAMIKA				
	Registered Office Address <u>(MUST BE FLORIDA STREET)</u>				
	6901A N 9TH AVENUE #576				
	PENSACOLA	32504			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Rocket Lawyer Corporate Services LLC		AND FILEI		
	NEW Registered Office Address:				
	155 Office Plaza Drive, 1st Floor		<u></u> 2		
	Tallahassee , F1.		on		
change agent was/we the arti Signat I herel provisi the obl to mere	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of cles of organization or the operating agreement of the member of a listatutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	registered office ability company, is the limited liability company of the limited liability company. It is the limited liability company of the limited liability company of the limited liability company of the liability company.	and the business office of the registered t is hereby confirmed that the change(s) litty company or as otherwise provided in ompany. Printed or typed parte of signee apacity. I further agree to comply with the ty duties, and I am familier with and accept		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Asst Secretary Rocket Lawyer Corporate Services LLC

Sine Ville.

Signature of Registered Agent