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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Phone : (561)214-8442 Fax Number Enter the email address for this business entity to be used for future to be used for future mailings. Enter only one email address please. ಲಿಕ್ಟ್ Email Address:\_ LLC REGISTERED AGENT CHANGE JEFFREY BARBER LLC

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M. SOLOMON

OCT - 3 2024

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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.

1. N	Tame of the limited liability company:	LC					
2. (a)	130 Racona Pass		(b)	pa Pass			
<b>2.</b> (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of li (Note: MAY BE I			-
	Davenport, FL 33897	_	Davenport.	, FL 33897			-
	09/13/2022		L220004005	567			
<ul><li>3.</li><li>5. (a</li></ul>	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document numb	per		
υ. (ω)	Registered Agent and Registered Office shown on the records o 476 Riverside Ave.  Registered Office Address (MUST BE FLORIDA STREET)		·	- e: -			
	Jacksonville, F	L		-	\$55. \$50.	2024 OCT -3	جمد دائشة
(b)	Corporate Creations Network Inc.				34.	CT -	t di
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	ddress:	-	55 55 55 55	3 FH	
	801 US Highway 1				ing:	ား ယ္	J
	NEW Registered Office Address:			•		58	
	North Palm Beach , F	L_33408		-			
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the Kristen Espinales	e registe iability of the li e limited	red office and company, it is mited liability I liability com	d the business off s hereby confirme y company or as o pany.	fice of the ed that the otherwise	registe chang	ered c(s)
Sion	ature of a member or authorized representative of a member		nsten Espinates	s, Attorney-in-Fact Printed or typed nat		<u> </u>	
I here provis the ob to me	eby accept the appointment as registered agent and agentions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I are writing of this change.  Kristen Espinales Kristen Espinsies, Special Secretary	gree to a e perfori ed for in hercby	ct in this capa nance of my a Chapter 605, confirm that t	acity. I further as	gree to co	moly w	rith the accept ig filed been

Signature of Registered Agent