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(Re	equestor's Name)				
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

		ACCOUNT NO.	:	12000000	195
		REFERENCE	:	638830	8137683
		AUTHORIZATION	:	Sanie	Cena
		COST LIMIT	:	\$ (25,00	
ORDER I	DATE :	April 4, 2023			
ORDER 3	ΓΙΜE :	8:50 AM			
ORDER 1		638830-007			
CUSTOM	ER NO:	8137683			
		CHANGE OF	<u>AGEN</u>	<u>T</u>	
	NAME:	RIDENOW POWE TALLAHASSSEE			
PLEASE	RETURN	THE FOLLOWING AS	S PR	OOF OF FII	lING:
	_	FIED COPY STAMPED COPY			

EXAMINER:

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

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	ame of the limited liability company: RIDENOW PO	WERSP	ORTS TALI	LAHASSEE LLC			
2. (a)			(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of (Note: MAY B)	limited liah	oility comp	рапу:
	901 W. WALNUT HILL LN., STE. 110A		901 W. \	WALNUT HILL E	.N., STE.	110A	
	IRVING, TX 75038	_	IRVING,	TX 75038			
	09/19/2022		L220004	05372			
3.	Date of filing/registration in Florida	4.		Document nun	nber		
5. (a)							
J. (a)	Registered Agent and Registered Office shown on the records of CAPITOL CORPORATE SERVICES, INC.	the Flori	la Dept. of St	ate:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>:S)</u>	_			
	515 E. PARK AVENUE, 2ND FLOOR						
	TALLAHASSEE	32301		_			
	FI	-		_		202	
(b)						2023 APR	
(1)	Enter name of NEW Registered Agent and/or NEW Registered	l Office a	<u>ddress</u> :	_		ìR 10	•
	Corporation Service Company			_		PH	
	NEW Registered Office Address:				• '	ယ္	الان ت
	1201 Hays Street			_	· -	c Q	
	Tallahassee	32301					
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the JILL CILMI	register ability co of the lin- limited	ed office ar ompany, it nited liabili liability cor	nd the business of is hereby confirmity company or a mpany. orized Person	office of the med that the southerwise	ne registe he chang se provic	ered ge(s)
-	·	4	e in elii -	Printed or typed i	_		alah ala
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide By reflect a change in the registered office address, I i I in writing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 60, onfirm that	pacity, I further duties, and I am 5, F.S. Or, if thi the limited liabi	agree to c i familiar is docume. ility comp	comply with and not is being any has	ith the laccept ig filed heen
		GRACI	E E. KIRBY	'. ASST. VICE I	PRESIDE	NT	