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T. LEMIEUX

MAR 2 4 2023

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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.

L N	ame of the limited liability company: FOLLOW THE S	ON CO	1,1,(
2. (a)			(b)					
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	_	_	.\	dailing address	s of limited liab BE POST OF	othty co	mpany
	3312 OAK AVENUE		.3	312 OAK	AVENUE			
	PLANT CITY, FL 33563	PLANT CITY, FL 33563						
	09/23/2022		1.2	20004154	81			
3.	Date of filing/registration in Florida	-4.		••	Document n	number		
5. (a								
J. 14.	Registered Agent and Registered Office shown on the records of MIRANDA, ADRIAN	the Flori	ida De	pt of State	-			
	Registered Office Address (MUST BF FLORIDA STREET A	IDDRE.	.5.5)		•			
	3312 OAK AVENUE							
	PLANT CITY FL	33563						
	- 110				•	~	~	
(b)	Enter name of NEW Registered Agent and/or NEW Registered					1-,	1023	
	Enter name of NEW Registered Agent and/or NEW Registered	Office :	addre	<u> </u>		-,	7023 K 50	
	LEGALINC CORPORATE SERVICES INC.						223	-
	NEW Registered Office Address					,	PM 12:	۲,
	476 Riverside Ave				_	·	<u>'</u>	
						<u></u> ;	<u>ت</u> 9	
	Jacksonville , FL	32202			_			
chang agent was/w	limited liability company is not organized under the law c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registe bility of f the li	red c comp mite	office and any, it is I liability ility com	I the busines hereby cont company o	ss office of t firmed that t or as otherwi	he regi he cha	istered nge(s)
Sign	Signature of a member of aythorized representative of a member					ed name of sig	nce	
I here provis the ob to men notify	why accept the appointment as registered agent and agraphs of all statutes relative to the proper and complete digations of my position in registered agent as provided reference a change in the registered office address. I have of Registered Agent	perfori	nanc	cojmjg	liujes, and L	am Jamiliar	with t	md accept

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