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## LLC REGISTERED AGENT CHANGE GROUND ZERO CREDIT SOLUTIONS LLC

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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	ame of the limited liability company:		DLUTIONS LLC	
2. (a)		(b) 506 BOHANNON BLVD		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	ORLANDO, FL 32824		ORLANDO, FL 32824	
	10/03/2022	L2	22000424433	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	LEGALINC CORPORATE SERVICES INC.			
5. (a)	Registered Agent and Registered Office shown on the record	is of the Florida D	ept. of State:	
	476 RIVERSIDE AVE			
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)		
	JACKSONVILLE	, FL 32202	2023 T	
(b)	Corporate Creations Network Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>		1023 DEC -4 F	
	timer hank of NEW Registered Agent and/or NEW Regist	tereu Onice nauri		
	801 US Highway 1			
	NEW Registered Office Address:		<del>்</del>	
	North Palm Beach	F1 33408		
chang agent was/w the arr Sign I hero provise the obto men	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the member ticles of organization or the operating agreement of a member of a listatutes relative to the proper and compulingations of my position as registered agent as provingly reflect a change in the registered office addressed in writing of this change.	the registered and liability compers of the limited liability the limited liability the limited liability agree to act in liele performant	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company.  Espinales, Attorney-in-Fact  Printed or typed name of signee  this capacity. I further agree to comply with the see of my duties, and I am familiar with and accept	

Kristen Capinales Kristen Espinales, Special Secretary
Signature of Registered Agent