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Division of Corporations

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DEPARTMENT OF STATE VISION OF COSPORATIONS TALLA I ASSEE, FLORIDA

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Help

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	me of the limited liability company:IkKicks LLC		
2. (a)	213 s shoreview dr	(b)	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Panama city Florida (US)32404		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/7/2022 12:00:00 AM	1.22	2000433142
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the record LEGALINC CORPORATE SERVICES INC.	s of the Florida Dep	ot. of State:
	Registered Office Address (MUST BE FLORIDA STRE	•	
	476 RIVERSIDE AVE		2: S.J.
	JACKSONVILLE	. FL	United the second se
(b)	Enter name of NEW Registered Agent and/or NEW Registered	and Office address	
	Enter name of NEW RESIdered Agent million Free Registre	ores Office duries	2.
	Corporate Creations Network Inc.		
	NEW Registered Office Address:		
	801 US Highway 1		
	North Palm Beach	, FL	
change agent v	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited at the ere authorized by an affirmative vote of the member icles of organization or the operating agreement of	the registered of d liability comp ers of the limited the limited liabi	ffice and the business office of the registered any, it is hereby confirmed that the change(s) is liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obi	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address din writing of this change.	agree to act in t ele performance ided for in Cha , I hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept over 605, F.S. Or, if this document is being filed rm that the limited liability company has been
anaryiei , .	an writing of this change.	Joseph l	Panholzer, Special Secretary
Signatu	re of Registered Agent		
	Division of Corporations • P.	O. Box 6327•	Tallahassee, FL 32314