## Florida Department of State Division of Soporations

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## LLC REGISTERED AGENT CHANGE SALAVATE 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:  Salavate LLC  |  |   |   |
|--|--|--|---|---|
| 2. (a)   | 2012 dearborry La  |  |   |   |
| <b>2.</b> (,                                     | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  | ,,   | M   | ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)   |
|  | Clermont,Florida (US)34714   | _  |   |   |
|  | 10/26/2022 12:00:00 AM   |  | L2200046014   | 8   |
| 3.   | Date of filing/registration in Florida   | 4.   | I   | Document number   |
| 5. (a  | LEGALING CORPORATE SERVICES INC.   |  |   |   |
| •  | Registered Agent and Registered Office shown on the records of 476 Riverside Ave.  |  |   |   |
|  | Registered Office Address (MUST BE FLORIDA STREET  |  |   |   |
|  | Jacksonville , FI  | 32202  |   | 202   |
| (b)  | Corporate Creations Network Inc.   | 2023 DEC   |   |   |
| ζ-,  | Enter name of NEW Registered Agent and/or NEW Registered   |  |   |   |
|  | 801 US Highway 1   | 7  |   |   |
|  | NEW Registered Office Address:   |  |   | . 45<br>  |
|  | North Palm Beach, FI   | 33408  |   |   |
| chang<br>agent<br>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 of ticles of organization or the operating agreement of the | ws of the<br>register<br>ability ec<br>of the lin<br>limited | ed office and<br>ompany, it is<br>nited liability<br>liability comp | the business office of the registered<br>hereby confirmed that the change(s)<br>company or as otherwise provided in   |
| Sign   | ature of a member cauthorized representative of a member   | -  |   | Printed or typed name of signee   |
| I here<br>provis<br>the ob-<br>to med<br>notific | eby accept the appointment as registered agent and agraions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect or change in the registered office address. I sed in writing of this change.                            | ree to act<br>perform<br>d for in (<br>hereby c              | t in this capac<br>ance of my d<br>Chapter 605,<br>onfirm that th   | city. I further agree to comply with the<br>uties, and I am familiar with and accept<br>F.S. Or, if this document is being filed<br>he limited liability company has been |
|  | ure of Registere Lacent Danielle   | Gossma   | n, Special S  | ecretary  |
| 3  |  |  |   |   |