Florida Department of State Division of Corporations

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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.

	ume of the limited liability company:		
2. (a)	854 Sea Holly Dr Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Brooksville, Florida (US)34604	(b) _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3 .	11/9/2022 12:00:00 AM Date of filing/registration in Florida	<u>1.22</u>	.22000481071 Document number
	LEGALING CORPORATE SERVICES INC.	₹.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave. Registered Office Address (MUST BE FLORIDA STREET A		· · · · · · · · · · · · · · · · · · ·
	Jacksonville, FL	32202	2023
(b)	Corporate Creations Network Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
	801 US Highway I		P (7)
	NEW Registered Office Address:		2: 49
	North Palm Beach, FL	33408	
:hange igent v vas/we	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 lia- ere authorized by an affirmative vote of the members of cles of organization of the operating agreement of the	registered oblitty comp of the limited	d office and the business office of the registered upany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
		Danielle	elle W. Gossman, Special Manager
	ure of a member or authofized representative of a member by accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I h I'm writing of this change.	ee to act in performance I for in Chaj	Printed or typed name of signee in this capacity. I further agree to comply with the nce of my duties, and I am Jamiliar with and acce hapter 605, F.S. Or, if this document is being file
o merc sotified	I'm writing of this change.	вегеоу сощь	njirm inai ine timaea tiawatiy company nas ween