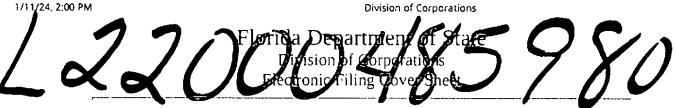
Division of Corporations



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To:

Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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JAN 12 2024

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 Standes, 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

. Na	une of the limited liability company:	LC		. ,
l. (a)		í	b)	
, , ,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		· /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	11/14/2022		L22000485	5980
=	Date of filing/registration in Florida	4.		Document number
. (a)	EDDINGS, SUSAN			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat			ate:
	1773 NW 401H AVE			
	Registered Office Address [MUST BE FLORIDA STREET ADDRESS]			
	Ste 101C			
	LAUDERHILL	, FL ³³³¹³		
(b)	Registered Agents Inc			TALLANIAS SERVELORIDA
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	tered Office ac	ldress:	
	7901 4th St N			
	NEW Registered Office Address:		5	
	STE 300	-		_
	St. Petersburg	_, FL33702		_
ie cha gent w as/we	mited liability company is not organized under the ngc or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the membeles of organization or the operating agreement of	ss of the reg ed liability c ers of the lir f the limited	stered offi ompany, it nited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
<u>/ (</u>	use of a member or authorized epresentative of a member	Rob	in Jones	
Signat	use of a member or authorized representative of a member			Printed or typed name of signee

I nercov accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secretary