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To:	_,,,,		
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	Fax Number	: (850)617-6383	2022
From:			3
	Account Name	: LEGALZOOM.COM INC.	)3
	Account Number	120010000062	ì
	Phone	: (323)962-8600	ف
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## LLC REGISTERED AGENT CHANGE DB&J MARKETING 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.

I. N	ame of the limited liability company: DB&J MARI	KETING LLC			
2. (a)	15900 Catalpa Cove Dr.	<sub>(b)</sub> 15900	(b) 15900 Catalpa Cove Dr.		
( <i>-</i> )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Fort Myers, FL 33908 Fort My		lyers, FL 33908		
	11/17/2022	L22000	492213		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	United States Corporation Agents, Inc.				
J. ("	Registered Agent and Registered Office shown on the records o 5575 S. Semoran Blvd., Suite 36	tate:			
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)			
	Orlando	L 32822	2022 DEC		
(b)	Doug Ruston		1 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
(0)		e of NEW Registered Agent and/or NEW Registered Office address:			
	15900 Catalpa Cove Dr.		AM II: 2		
	NEW Registered Office Address:		7		
			<u></u>		
	Fort Myers	33908			
the ch agent was/w	timited liability company is not organized under the hange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited levere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered off liability company, i of the limited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in		
	Jon Kuston	Doug Rusto			
_	nture of a member or authorized representative of a member		Printed or typed name of signee		
I here provis the ob to mer notifie	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as provid sely reflect a change in the registered office address, led in writing of this change	gree to act in this co e performance of m led for in Chapter b I hereby confirm the	spacity. I further agree to comply with the walties, and I am familiar with and accept 05. F.S. Or, if this document is being filed as the limited liability company has been		
Signati	ure of Registered Agent				