## Florida Department of State

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Division of Corporations

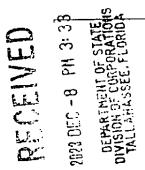
Fax Number : (850)617-6383

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Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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## LLC REGISTERED AGENT CHANGE MCGREGOR CONSULTATIONS LLC

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K. Brumbley

## 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.

( )	200 white st unit 8	d-X	<b>N</b>
. (a)	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	(b).	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Niceville,Florida (US)32578		
	11/21/2022 12:00:00 AM	 1.2	L22000497223
· (a)	Date of filing/registration in Florida LEGALING CORPORATE SERVICES INC.	4.	Document number
. (a)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Florida D	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<u> </u>
	Jacksonville , FL	32202	2
(b)	Corporate Creations Network Inc.		2023 DEC
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 801 US Highway 1	l Office addr	- B = 社会
	NEW Registered Office Address:		PH 2: 2
	North Palm Beach , FL	33408	
hange gent v 'as/we	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members coles of organization or the operating agreement of the	registered ability com of the limite	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
	(a)	Daniell	elle W. Gossman, Special Manager
Signat	ure of a member or althorized representative of a member	<del></del>	Printed or typed name of signee
evnei ci.	by accept the appointment as registered agent and agrons 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 have the provided of this whange.	nerformen	once of my duties, and I can familian with and accer
ie obi. ) mere	riv reflect a change in the registered office address, 1 r Fin positing of this physics	hereby conj	njirm inai ine umitea itability company nas been