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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

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

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LLC REGISTERED AGENT CHANGE **DESCENDANT LEGACY CONSUMER LLC**

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K. SALY

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12/11/2024 09:26:46 PST ' To: 18506176383 Page: 2/2 Fax: \$134365206

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. No	ame of the limited liability company: Descendant L	_egac	y Consum	ner Limited Liability Company	
2. (a)					
(,	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	7901 4th St N STE 300		7901	4th St N STE 300	
	St. Petersburg, FL 33702		St. Petersburg, FL 33702		
	12/05/22		L220	00510330	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	REPUBLIC REGISTERED AGENT LL	-C			
U. (-)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of St	tate:	
	1150 NW 72ND AVE TOWER I				
	Registered Office Address (MUST BE FLORIDA STREET)	55)			
	STE 455			_ 75	
	MIAMI)2	DEA DEC 11 SECKE PASS TALLAHASS	
(b)	Northwest Registered Agent L				
()	Enter name of NEW Registered Agent and/or NEW Registered	二 			
	7901 4th St N			PH 3: 15	
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg ,FL	3370)2	<u></u>	
the cha agent v was/we the arti Signa I here provision	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the litere of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide left reflect a change in the registered office address, I is din writing of this change.	the regability of the limited N	gistered officompany, it mitted liabil liability coat Smith	ice and the business office of the registered tis hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee apparatus. I further garee to comply with the	

Signature of Registered Agent

Taylor Newman - Assistant Secretary