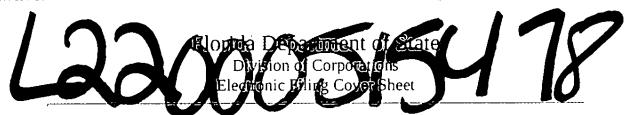
Page: 1/2 Fax: 8134365206 1/21/2025 4 0:41:09 PST To: 18506176383



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000019740 3)))



H250000197403ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

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 futur $\overset{\sim}{\mathbf{e}}$ ... annual report mailings. Enter only one email address please.\*\*

Email	Address:				•
••		 	 		_
· ·					

## LLC REGISTERED AGENT CHANGE JAY A SWAN ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

-G20Z-4-Z-N∀ſ

T. LEMIEUX

1/21/2025 10:41:09 PST To: 18506176383 Page: 2/2 Fax: 8134365206

## 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. Na	une of the limited liability company:	NTERPR	ISES	, LLC				
2. (a)			(b)					
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Maili	ng address o ote: MAY B	f limited lia	abilay co	mpany:
	7901 4th St N STE 300		7901 4th St N STE 300					
	St. Petersburg, FL 33702		5	St. Petersburg,	FL 33702			
	12/08/22		LZ	2000515478				
3.	Date of filing/registration in Florida	4.		Doo	cument nu	mber		
5. (a)	INC AUTHORITY RA							
J. (W)	Registered Agent and Registered Office shown on the records of							
							2223	
	Registered Office Address (MUST BE FLORIDA STREET	Registered Office Address [MUST BE FLORIDA STREET ADDRESS]					(2) (	
	390 NORTH ORANGE AVE., STE 2300-N						<u> </u>	
	ORLANDO	L 32801		<del></del>			1,2	
		L					P:	
(b)	Registered Agents Inc					:	Pii 4: 2	•
,	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	addr	255:		i:	2	
	7901 4th St N							
	NEW Registered Office Address:			<del></del>				
	STE 300							
	St. Petersburg	33702 L						
the cha agent v was/we the arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the re- iability of the li- e limited	giste com imite d lia	red office and pany, it is hered and liability co- bility compan	d the busin reby confir mpany or a	css officermed that	e of the the cha	registered ange(s)
Signal	ture of a member or authorized representative of a member	— HC	, וזוטכ	)ones Prir	sted or typed	Lname of si	iguee	
I herei provisi the obl to mere	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I I in writing of this change.	e perfor ed för ir hereby	man i Ch con	r this capacity	: I furthe	r avree te	s compl	y with the and accept being filed as been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent