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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 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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LLC REGISTERED AGENT CHANGE GENER USA, LLC

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MAR 13 2024

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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.

. Na	ume of the limited liability company:	.LC
. (a)		(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)
	7901 4th St N STE 300	433 North Loop West Fwy
	St. Petersburg FL 33702	Houston TX 77008
	12/22/22	L22000534248
	Date of filing/registration in Florida	4. Document number
. (a)	SYNERGY BUSINESS GROUP. LLC	
	Registered Agent and Registered Office shown on the records of	
	8200 NW 41ST STREET	
	Registered Office Address (MUST BE FLORIDA STREE)	<u>r address)</u>
	SUITE 315	
	DORAL . F	
(b)	Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N	2021 HAR 12 AH 9: 24 205 STATE
	NEW Registered Office Address:	±₩ 2
	STE 300	
	St. Petersburg	7L 33702
ie cha gent v ras/wo ie arti	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	laws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) is of the limited liability company or as otherwise provided in the limited liability company.
Signa	thre of a member or authorized representative of a member	Printed or typed name of signee
herel rovisi ne obl o mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address, d'in writing of this change.	gree to act in this capacity. I further agree to comply with the ie performance of my duties, and I am Jamiliar with and occept ded for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
-7	Taylor Newman - Assistant	Secretary