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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,

(a)		(b)	
4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: ( <u>Note: MAY BE POST OFFICE BOX</u> )
	12/23/22	L2200	00536308
	Date of filing/registration in Florida	4.	Document number
(ຄ)	Kreusler, Robert		
( )	Registered Agent and Registered Office shown on the record	s of the Florida Dept.	of State.
	1925 North Flagler		
	Registered Office Address (MUST BE FLORIDA STRE	<u>ET ADDRESS)</u>	
	West Palm Beach	33407	
	West Palm Beach	, FL	<b>(</b>
(b)	Northwest Registered Agent LLC		
	Enter name of NEW Registered Agent and/or NEW Regist	ered Office address:	
	7901 4th St N		··
	<u>NEW</u> Registered Office Address:		10
	STE 300		
	St. Petersburg	. FL <sup>33702</sup>	
chai nt w s/we	mited liability company is not organized under the nge or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite the authorized by an affirmative vote of the member cles of organization or the operating agreement of $2$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ , $C^{-1}$ , $A^{-1}$ ,	s of the registered d liability comparers of the limited l	l office and the business office of the registry, it is hereby confirmed that the change(s iability company or as otherwise provided

Thereby accept the appointment as registered agent and agree to act in this capacity. Thirther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been motified in writing of this change.

/ Var Taylor Newman - Assistant Secretary

Signature of Registered Agent

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