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Division of Corporations



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OCT 1 1 2023

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.

	ame of the limited liability company:SURGE FUN	DING, LL	<b>~</b>	
2. (a)		_ (b) _	·····	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Nets: MAY BE POST	
	4851 TAMIAMI TRAIL NORTH, SUITE 200		4851 TAMIAMI TRAIL NORTI	I, SUITE 200
	NAPLES, FL 34103		NAPLES, FL 34103	
	12/29/2022		L23000003941	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of th	- Flarida Da	A we for the second	
		e rionaa iyep	i. or State:	
	AGUIRRE, ALEXANDRA M, ESQ.		<u> </u>	
	Registered Office Address (MUST BE FLORIDA STREET AL	<u>DDRESS)</u>		
	701 BRICKELL AVENUE, SUITE 3300			
	MIAMI , FL	33131		20
			<del></del>	27 B
(b)				00
	Enter name of NEW Registered Agent and/or NEW Registered O	mce address		PILED 2023 OCT 10 PH 12: 4
	CORPORATE CREATIONS NETWORK			
	NEW Registered Office Address:	·		I II
				~ Ņ
	801 US HIGHWAY I		<u>.</u>	· · ·
	NORTH PALM BEACH, FL_	33408		
the lie	mited liability company is not occorriged under the large	afel. Co.	- 6m. 13 1. 1 1	
nange	mited liability company is not organized under the laws or changes are made, the Florida street address of the re	gistered of	tice and the husiness office of	Etha readiatored
geni w	in be identical. Or, in the case of a Florida limited light	lity compa	ny it is hereby confirmed the	t the chesical of
as/wei	re authorized by an affirmative vote of the members of i	the limited	liability company or as otherw	wise provided in
	(in a plana) phaba		aman, Managing Member	
Signatu	ire of a member or authorized representative of a member	Jana Se	Printed or typed name of s	
~	e accept the appointment as registered agent and agree ns of all statutes relative to the proper and complete pe			

provisions of all statutes relative to the proper and complete performance of my duites, 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, I hereby confirm that the limited liability company has been notified in writing of this change.

/s/ Caitlin Lazarus

Caitlin Lazarus, Special Secretary

Signature of Registered Agent

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

INHS18 (2/14)