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LLC REGISTERED AGENT CHANGE RON DAVIS CREATIVE LASER DESIGN, LLC

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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.

1.	Na	me of the limited liability company: Ron Davis Cre	eative L	<u>aser Des</u>	ign, LLC			
2.	(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)			
								
		01/03/2023	L	_2300000	06878			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	INC AUTHORITY RA						
	,	Registered Agent and Registered Office shown on the records of the	re Florida E	Dept. of State		٠.,	2	
		390 NORTH ORANGE AVE., STE 2300-N		; ;	123 /			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				2011 2011 2011	2023 APR 27	
		ORLANDO , FL	32801			HARY OF SIX	7 AH 11:	
	(b)	Registered Agents Inc				377 377 578	1:2:	٠
	()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addr	ess:			10	
		7901 4th St N						
		NEW Registered Office Address:						
		STE 300						
		St. Petersburg , FL	33702					
the ag wa the	e cha ent v is/we e arti	imited liability company is not organized under the law, inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he registo bility con the limit	ered office ipany, it is ed liability	and the business offi hereby confirmed th company or as other	ice of the at the cha	registe inge(s)	
1	/ _/	ture of a member or authorized representative of a member	Robii	<u>n Jones</u>	Printed or typed name of	·		
r protection no	ovisi e obl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I had no writing of this change.	e to act in performan for in Ch ereby con	a ans cupa ice of my d iapter 605, firm that t	Cav. 1 pa (ae) agree luties, and I am famil F.S. Or, if this docu he limited liability co	iar with i ment is b impany h	md acc neing fil as been	ept ed

Durid Comes David Roberts - Assistant Secretary
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

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