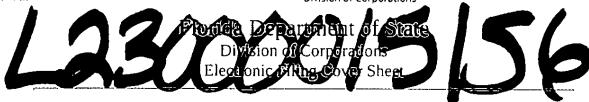
Division of Corporations



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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

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T. LEMIEUX

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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.

(21		(b)	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	01/06/23		000015156
	Date of filing/registration in Florida	4.	Document number
(a)	· · · · · · · · · · · · · · · · · · ·	****	
(b)	Registered Agent and Registered Office shown on the records of 1150 NW 72ND AVE TOWER I	of, of State:	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)	<u></u>
	STE 455		
	MIAMI	L 33126	
	, F	L	
	Northwest Registered Agent LLC		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		5: 3
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
			
	St. Petersburg	33702 L	23
e cha ent v is/wi e art	limited liability company is not organized under the lange or changes are made, the Florida street address will 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	aws of the State of the registere liability compared of the limited	ed office and the business office of the registe any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
	1714 Smith	Nat Smitt	
_	nture of a member or authorized representative of a member		Printed or typed name of signee
here ovist e obt mer tifiy	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	gree to act in t e performance led for in Chap I hereby confit	this capacity. I further agree to comply with t e of my duties, and I am familiar with and acc oter 605, F.S. Or, if this document is being fil rm that the limited liability company has been
/ V~	Taylor Newman - Assistant :	Secretary	