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LLC REGISTERED AGENT CHANGE XOTIC FRUIT CUPS LLC

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S. RODERTS

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	me of the limited liability company: Xotic fruit cups LL	C				
(a)	8206 , 25th St E		b) _	8206 , 25th St E		
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- ``	~,_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Parrish, FL 34219	- -	- -	Parrish, F	L 34219	
	01/09/2023		1.2	13000019	769	
(a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.			Document number	
(a)	Registered Agent and Registered Office shown on the records of the 476 Riverside Ave. Registered Office Address (MUST BE FLORIDA STREET AL	——————————————————————————————————————				
	Jacksonville FL	32202			2024. SEC: TAI	
(b)	Corporate Creations Network Inc.				2024 JAN 25 SECRE JANA TALLAHA	
	Enter name of NEW Registered Agent and/or NEW Registered Office address: 801 US Highway 1			N25 AMII:		
	NEW Registered Office Address:				75 % %	
	North Palm Beach , FL	33408			-	
iange gent v as/wo	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister ility co the lin	ed o omp nite	office an pany, it i d liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
	Kristen Espinales	Kri	sten	Espinale	es, Attorney-in-Fact	
Signat	ture of a member or authorized representative of a member				Printed or typed name of signee	
ovisi e obl mere	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 he I'in writing of this change.	e to ac. erform for in (reby c	t in and Cha onf	this cap se of my spter 60; irm that	acity. I further agree to comply with the duties, and I am familiar with and acces, F.S. Or, if this document is being file the limited liability company has been	

Signature of Registered Agent