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Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE FLORIDA COZY HOME, PLLC

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T. LEMIEUX DEC 27 2023

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company:	DA COZY HOME, PLL	_c		
2. (a	1	(h)			
2. 1.	Principal office address of limited liability con (Note: MUST BE STREET ADDRESS	npany:	Mailing address of limited liability	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)	
		<u></u>			
	01/20/23	L	.23000039352		
3.	Date of filing/registration in Florida	4.	Document number		
5. ($_{ m a, 1}$ UNITED STATES CORPORATION AGENTS, IN				
(Registered Agent and Registered Office shown on the	records of the Florida L	Dept. of State:		
	476 RIVERSIDE AVE.				
	Registered Office Address (MUST BE FLORIDA	STREET ADDRESS)			
	JACKSONVILLE	FL_32202			
_	Registered Agents Inc				
(b	Enter name of NEW Registered Agent and/or NEW	Registered Office addr	<u>ress</u> : 5		
			12	7	
	7901 4th St N		· P	t,	
	NEW Registered Office Address:		<u></u>		
	STE 300				
	St. Petersburg	, FL			
the c agen was/ the a	Elimited liability company is not organized und hange or changes are made, the Florida street at will be identical. Or, in the case of a Florida lawere authorized by an affirmative vote of the mitteles of organization or the operating agreement.	ddress of the registe limited liability con nembers of the limit ent of the limited lia	tered office and the business office of the inpany, it is hereby confirmed that the ted liability company or as otherwise part of the input of the i	the registered change(s)	
Sig	Red to Journey nature of a member or authorized representative of a mem	iber	Printed or typed name of signee		
наш	rehy accept the appointment as registered agenisions of all statutes relative to the proper and obligations of my position as registered agent as registered affice acted in writing of this change. David Roberts - As	et and agree to act i complete performa s provided for in Cl ddress. I hereby con ssistant Secretary	in this capacity. I further agree to connec of my duties, and I am familiar with hapter 605, F.S. Or, if this document infirm that the limited liability compan	nply with the th and accept is being filed y has been	

Signature of Registered Agent