Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000063341 3)))



H240000633413ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC REGISTERED AGENT CHANGE 3H LIFESTYLE LLC

Certificate of Status	0	
Certified Copy	()	
Page Count	02	
Estimated Charge	\$25.00	

K. SALY

FEB 1.6 2024
· · · · · · · · · · · · · · · · · · ·

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.

2. (a)	3237 Brookasher Drive	(b) 3237 Brookasher Drive			
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Jacksonville, FL 32218	Jac	Jacksonville, FL 32218		
	01/26/2023	L23000050083			
3. 5. (a)	Date of filing/registration in Florida LEGALING CORPORATE SERVICES INC.	4.	Document number		
(b)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	MRA FEB 15 PH 3: 20		
	Jacksonville, FI	- 15 PH			
	Corporate Creations Network Inc.	بي الله			
	Enter name of NEW Registered Agent and/or NEW Registered	20			
	801 US Highway I				
	NEW Registered Office Address:				
	North Palm Beach	33408			
change agent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liare authorized by an affirmative vote of the members cales of organization or the operating agreement of the	registered of ability compa of the limited	Tice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in		
	Kristen Espinales		Kristen Espinales, Attorney-in-Fact		
Signati	are of a member or authorized representative of a member		Printed or typed name of signee		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, 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.

Kristen Espinales Kristen Espinales, Special Secretary

Signature of Registered Agent