Florida Department o

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (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.

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LLC REGISTERED AGENT CHANGE COMPRALODETODO LLC

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K. SALY

FEB-1-6-2024

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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.

2. (a)	2015 Chickasaw blvd		(b) 2015 Chickasaw blvd		
()	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	_	(07	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Davenport, FL 33837		Davenport, FL 33837		
	01/27/2023		1.2300005	32048	
3.	Date of filing/registration in Florida	4.		Document number	
(b) <u>.</u>	LEGALING CORPORATE SERVICES INC.				
	Registered Agent and Registered Office shown on the records of the	ne Flori	da Dept, of Si	tate:	
	476 Riverside Ave.				
	Registered Office Address (MUST BE FLORIDA STREET A	_			
			_	14. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12	
	Jacksonville				
	, FL	32202		- £ 6	
	Corporate Creations Network Inc.			EB 15 PA	
	Enter name of NEW Registered Agent and/or NEW Registered C				
	801 US Highway I			2024 FEB 15 PM 3: 19 TALLAHASSEE FILORIO	
	NEW Registered Office Address:	1 	· · · · · · · · · · · · · · · · · · ·		
	North Palm Beach, FL_	3408			
hange gent w vas/we	mited 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 liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egiste ility c the li	red office a ompany, it nited liabil	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
	Kristen Espinales		•	les, Attorney-in-Fact	
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	
rovisi	oy accept the appointment as registered agent and agre- 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	criorn	<i>rance of m</i> y	duties and Lam familiar with and accept	

Signature of Registered Agent

Kristen Espinales