## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

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

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## LLC REGISTERED AGENT CHANGE KJM PUBLICATIONS 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)	8785 SW 58th Street		(b) 8785 SV	V 58th Street			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del>Na-a</del>	(0)	Mailing address of limit (Note: MAY BE PO			
	Cooper City, FL 33328		Cooper C	City, FL 33328			
	01/30/2023		L2300005	5502			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	LEGALING CORPORATE SERVICES INC.						
J. (4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	476 Riverside Ave.						
	Registered Office Address (MUST BE FLORIDA STREET.		15/2				
					E H		
(0)_	Jacksonville	32202		_	MATER 15 F		
	Corporate Creations Network Inc.				PM 3: 20		
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		. 20 Ger		
	801 US Highway 1				9.4 0		
	NEW Registered Office Address:	•		_			
	North Palm Beach	33408		_			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the registed bility of the li	e State of F red office ar company, it mited liabili	nd the business office is hereby confirmed to ty company or as oth	of the registered that the change(s)		
	Kristen Espinales			es. Attorney-in-Fact			
Signat	ture of a member or authorized representative of a member		· · ·	Printed or typed name	of signee		
novisi he obli o mere	by accept the appointment as registered agent and agro 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 h I'in writing of this change.	ee to a perform l for in ereby	ct in this cap nance of my Chapter 60, confirm that	oacity. I further agre duties, and I am Jam 5. F.S. Or, if this doo the limited liability o	e to comply with the iliar with and accept cument is being filed company has been		
	Kristen Espinales Kristen Espinales. Special Secretary						

Signature of Registered Agent