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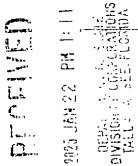
From:

Account Name : REGISTERED AGENTS INC.

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

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LLC REGISTERED AGENT CHANGE ENGINEERING2.COM, LLC

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T. LEMIEUX

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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.

l. Na	une of the limited liability company: ENGINEERING2	.COM, LLC	•	
2. (a)		(b)		
(/ -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	7901 4th St N STE 300	79	7901 4th St N STE 300	
	St. Petersburg FL 33702	St. Petersburg FL 33702		
	02/06/23	L23	3000066529	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	REGISTERED AGENT SOLUTIONS, INC.			
	Registered Agent and Registered Office shown on the records of			
	2894 REMINGTON GREEN LANE			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	SUITE A			
	TALLAHASSEE FI	32308	2025	
(b)	Northwest Registered Agent LLC			
	Enter name of NEW Registered Agent and/or NEW Registered	l Office address	<u>ss:</u>	
	7901 4th St N			
	NEW Registered Office Address:		———	
	STE 300		ජා 	
			<u> </u>	
	St. Petersburg	_33702		
the cha agent w was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cless of organization or the operating agreement of the AVAT SAMATA.	f the registere ability compa of the limited	ed office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in	
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisu the obli to mere notifica	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I d in writing of this change.	performance d för in Chap hereby confi	e of my dulies, and I am familiar with and accept	
	Taylor Newman - Assistant S	ecretary		
Signatul	re of Registered Agent			