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Division of Corporations



Electronic Filing Menu Corporate Filing Menu

<u>.</u> Hélip? - 5 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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. (a)	(b)				
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of lumit (<u>Note: MAY BE PO</u>	ed liability con	ipany
	02/09/2023		L23000073266		
	Date of filing/registration in Florida	4.	Document number		
(a)			<u> </u>		
	Registered Agent and Registered Office shown on the records o	f the Florida Dept, of	f State.		
	1112 NE FRANCES ST				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	Registered Office Address (<u>MUST BE FLORIDA STREET</u>	<u>'ADDRESS)</u>			
(b)	Registered Office Address (MUST BE FLORIDA STREET JENSEN BEACH			ور	~2
(b)	JENSEN BEACH I [.]	1 <u>. 34957560</u>			2023
(h)	JENSEN BEACH	1 <u>. 34957560</u>			- d. H 6002
(h)	JENSEN BEACH	1 <u>. 34957560</u>			
(h)	JENSEN BEACH . F Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	1 <u>. 34957560</u>		- - - - -	1 I

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

$\frac{\partial \sigma_{ij}}{\partial t} = \frac{\partial \sigma_{ij}}{\partial t} + \frac{\partial \sigma_{ij}}$	Robin Jones
Signature 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. David States Da

David Roberts - Assistant Secretary

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 **FILING FEE: \$25.00**