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Account Number : FCA000000023 Phone : (614)280-3338

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LLC REGISTERED AGENT CHANGE TIDE LLC

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K. SALY

JAN 17 2025

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

12122023573

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.

. Na	me of the limited liability company: TIDE LLC						
!. (a)	6318 Pasadena Point Blvd.	(t	(b) 6318 Pasadena Point Blvd.				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Gulfport, FL 33707	_	Gulfport, I	F1. 33707			
	02/16/2023	_	L230000848	870			
	Date of filing/registration in Florida	4.		Document number			
. (a)	NFG Corporate Services LLC						
. (a)	Registered Agent and Registered Office shown on the records of to 3300 Alt. 19N	ē:					
	Registered Office Address (MUST BE FLORIDA STREET) #127	2)					
	Dunedin, FL	34689		SHE RE			
(1.)	C T Corporation System	5 F					
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	dress:	FILEU 3: 55				
	NEW Registered Office Address:		-				
	1200 South Pine Island Road			-			
	Plantation , FL	33324		_			
he cha gent w vas/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi ibility co f the lim	stered office impany, it i iited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in			
J		Jess	ica Crowley				
	ure of a member or authorized representative of a member			Printed or typed name of signee			
rovisio ne obli o mere otified	oy accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, 1 here. CT Corporation System	perform I for in G iereby c	ance of my Chapter 605 onfirm that	duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been			
y: Signatur	se of Registered Agent	L. EMERIO	CK, ASSISTANT	SECHELARY			