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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (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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DEPARTMENT OF STATE
VISION OF CORPORATIONS
TALL AND SEE FLORIDA

LLC REGISTERED AGENT CHANGE SENAT TRANSPORTATION LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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| , | K. SALY | |
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MAR - 7 2024

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Corporate Filing Menu

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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.

| 1. | Na | ime of the limited liability company: | | | 1209 Colo | onial palm way | |
|-----------------------|-------------------|--|---|----------------------|--|--|--|
| 2. (| a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (b |) _ | | Mailing address of limited liab (Note: MAY BE POST OF | |
| | | west palm beach, FL 33406 | _ | V | vest palm | beach, FL 33406 | |
| | | 02/23/2023 | | 1.3 | 230000970 | 030 | |
| 3. | | Date of filing/registration in Florida | 4. | | | Document number | · · · · · · |
| 5. { | ัลไ | LEGALING CORPORATE SERVICES INC. | | | | | |
| ••• | , | Registered Agent and Registered Office shown on the records of t | he Florida | D | ept, of Stat | – ៥: | |
| | | 476 Riverside Ave. | | | | | <u>ب.</u> |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | |
| | | | | | | ب پر | |
| | | Jacksonville , FL | 32202 | | | | DEA HAR -6 PH 4: 04 |
| | | , PL | | | | - | STE THE |
| (1 | b) | Corporate Creations Network Inc. | | | | | 四二 (|
| | , | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | Office add | ire | <u> </u> | | ORAL O |
| | | PALLIS Hinkum 1 | | | | | €1. + |
| | | 801 US Highway 1 | ····· | | - | _ | • |
| | | NEW Registered Office Address: | | | | | |
| | | North Palm Beach | 22.1719 | | | - | |
| | | FL. | 33408 | | | _ | |
| chan agen was/ | ige it v | imited liability company is not organized under the law or changes are made, the Florida street address of the vill 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 l | registered bility cou f the limi | d o mp ite | office and pany, it is id liability | d the business office of the hereby confirmed that the company or as otherwise. | he registered he change(s) |
| | | Kristen Espinales | Krist | en | Espinale. | s, Attorney-in-Fact | |
| Sig | șnal | ture of a member or authorized representative of a member | | | | Printed or typed name of sig | nee |
| prov the o to m | isi obl erc | by 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 h I'm writing of this change. | ve to act i performa I for in C ereby co | in nc ha nf | this cape te of my e ipter 605 irm that i | acity. I further agree to duties, and I am Jamiliar furies, and I am Jamiliar furies. Or, if this docume the limited liability comp | comply with the with and accept int is being filed any has been |
| | | Kristen Espinales Kristen Espinales. Special Secretary | | | | | |

Signature of Registered Agent