## Elorida Department of State

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Division of Corporations

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

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## LLC REGISTERED AGENT CHANGE TRUE YOU EXPRESSIONS LLC

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MAR 15 2024 K. Brumble)

## 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. N	ame of the limited liability company: True You Expres	ssions L	LC		
2. (a)	4273 NW 55th Pl		(b) 4273 NW	55th Pl	
<b>-</b> . (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Coconut Creek, FL 33073		Coconut C	reek, FL 33073	
	02/27/2023		1.230001037	798	
<ol> <li>(a)</li> </ol>	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number	
(u)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	f the Flo	rida Dept, of State	 c:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)	-	
(b)	Jacksonville, F	L_3220	2	-	
	Corporate Creations Network Inc.			2024 P	
	Enter name of NEW Registered Agent and/or NEW Registere 801 US Highway 1	<u>d Offici</u>	<u>address</u> :	2024 HAR 1 4	-
	NEW Registered Office Address:				4
	North Palm Beach, F	L	8		
change agent was/w	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited beer authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e regis iability of the	tered office and company, it is limited liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	ю
	Kristen Espinales	ŀ	Cristen Espinale	s, Attorney-in-Fact	
Signa	iture of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob- to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change.	o norto	emance of my a	duties, and Lam lamiliar with and accei	)/
	Kristen Espinales Kristen Espinales. Special Secretary				

Signature of Registered Agent