Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

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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LLC REGISTERED AGENT CHANGE **GENTLE MINERAL LLC**

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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.	Name of the limited liability company: Gentle	e Mineral LLC	
2. (a		(b)	
	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	03/06/2023	L2300	00117864
3.	Date of filing/registration in Florida	4.	Document number
5. (a	a) CALDWELL, MARCHE A		
(-	Registered Agent and Registered Office shown on the reco	ords of the Florida Dept. of Sta	ite:
	3302 JOHN HANCOCK DR		_
	Registered Office Address (MUST BE FLORIDA STE	REET ADDRESS)	
	TALLAHASSEE	32312	2
(b	Northwest Registered Age	nt LLC	2023 HAY 30
	Enter name of NEW Registered Agent and/or NEW Registered Agent	istered Office address:	- Y30
	7901 4th St N		- P -: '
	NEW Registered Office Address:		~ - -
	STE 300		_ £
	St. Petersburg	_ _{. FL} 33702	_
the ci agent was/v the a	e limited liability company is not organized under thange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limiwere authorized by an affirmative vote of the mem rticles of organization or the operating agreement of the member of a memb	ess of the registered officited liability company, it abers of the limited liability coff the limited liability contact and the	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	nature of a member or authorized representative of a member reby accept the appointment as registered agent ar		
provi the o to me	reby accept the appointment as registered agent as isions of all statutes relative to the proper and con- bligations of my position as registered agent as pr grely reflect a change in the registered office addra ied in writing of this change.	ad agree to act of this ca pplete performance of my wided for in Chapter 60 ess, I hereby confirm tha	eduties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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

Taylor Newman - Assistant Secretary

Signature of Registered Agent