Florida Department of State Division of Corporations Electronic Filing Coxet Sheet

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TT NE SE STATE OF STA

LLC REGISTERED AGENT CHANGE GODDESS ALASHA 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. N	ame of the limited liability company:	LLC			
2. (a)	1455 Capitola Road		(b)	1455 Capitola Road	
(M)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Mailing address of limited liability company: <i>Onne: MAY BE POST OFFICE BOX)</i>	
	Tallahassee, FL 32317	_	-	Tallahassee, FL 32317	
	03/13/2023		1.	23(нх)129297	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	LEGALING CORPORATE SERVICES INC.				
-/. (u)	Registered Agent and Registered Office shown on the records of	the Flori	ida D		
	476 Riverside Ave.			7077 ::	
(b)	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>SS)</u>	2074 E 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Jacksonville , FI	L_32202		· - !	
	Corporate Creations Network Inc.				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	801 US Highway 1				
	NEW Registered Office Address:				
	North Palm Beach, FI	33408			
change agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of of the li	ered com imite	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in	
	Kristen Espinales	Kı	rister	n Espinales, Attorney-in-Fact	
Signa	sture 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 agi 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.	*perfort	nan	ce of my duties, and I am familiar with and accept	

Kristen Espiriales, Special Secretary

Kristen Espinales

Signature of Registered Agent