## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

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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 LJM BROWN LLC

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APR 0 8 2024 Help

K. Brumbley

## 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: LJM Brown LLC				
2. (a)	2702 east Columbus Drive		(b) 2702 east Co	olumbus Drive	
2. (4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	Ma	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Tampa, FL 33605		Tampa, FL 3.	3605	
	03/23/2023		L23000148787	7	
<ol> <li>(a)</li> </ol>	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.	D	Occument number	
(u)	Registered Agent and Registered Office shown on the records of a 476 Riverside Ave.	the Flor	ida Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	Jacksonville	32202			
(b)	Corporate Creations Network Inc.			2024 APR -5	
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	ガ . ! :-	
	801 US Highway I			σ · · · · · · · · · · · · · · · · · · ·	
	NEW Registered Office Address:			# 5: 30	
	North Palm Beach, FL	33408	l		
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist bility of the l	ered office and t company, it is h imited liability of	the business office of the registered nereby confirmed that the change(s) company or as otherwise provided in	
	Kristen Espinales	K	risten Espinales, .	Attorney-in-Fact	
Signa	ture of a member or authorized representative of a member		ļı	rinted or typed name of signee	
provis. the obt to mer	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	ee to c perfor I for it tereby	ict in this capaci mance of my du i Chapter 605. I confirm that the	ity. I further agree to comply with the ties, and I am familiar with and acce F.S. Or, if this document is being file e limited liability company has been	
	Kristen Espinales Kristen Espinales, Special Secretary				

Signature of Registered Agent