Florida Department of State Division of Corporations Electronic Filting Cover Sheets State State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000159352 3)))



H240001593523ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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.

Email Address:_____

PERIOR OF CORPORATIONS

OVERSION OF CORP. PLORIDA

OVASION OF CORP. PLORIDA

OVASION OF CORP. PLORIDA

OVASION OF CORP. PLORIDA

LLC REGISTERED AGENT CHANGE MIGMAR VENDING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 0 1 2024 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.

2. (a)	400 CENTURY 21 DR.		(b) 400 CENTURY 21 DR.				
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	APT C467		APT C467				
	JACKSONVILLE, FL 32216	_	JACKSON	VILLE, FL 32216			
	05/01/2024		L230001503	24			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	LEGALINC CORPORATE SERVICES INC.						
J. (4)	Registered Agent and Registered Office shown on the records of 476 RIVERSIDE AVE.	the Flo	rida Dept, of State	:			
	Registered Office Address (MUST RE FLORIDA STREET	ADDR.	ESS)				
	JACKSONVILLE , FL	3220.	2				
(b)	Corporate Creations Network Inc.				20241:377 -		
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		=======================================	٠.	-
	801 US Highway 1				-	;- .	
	NEW Registered Office Address:				P		• •
					<u> </u>		
	North Palm Beach, FL	3340	3				
change agent v was/wa	imited liability company is not organized under the law 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 ability of the	ered office and company, it is limited liability	the business office of hereby confirmed that company or as otherw	the regi	istered inge(s)	
	strella Tavarez	E	strella Tavarez,	Attomey-in-Fact			
Signa	ture of a member or authorized representative of a member	_	•	Printed or typed name of si	gnee	• • • • • • • • • • • • • • • • • • • •	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

strella Tavarez Estrella Tavarez, Special Secretary Signature of Registered Agony