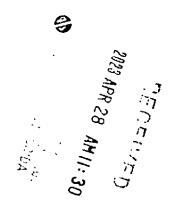
## L23000 176497

	(Requestor's Name)
	(Address)
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	(1.00,033)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
	(Dodding Hall) Bell
	Continue of Change
Copies	Certificates of Status
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istructions to	Filing Officer:
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Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 7707957 8264125							
AUTHORIZATION TO THE REAL PROPERTY OF THE PROP							
COST LIMIT : \$ 25.00							
ORDER DATE : April 27, 2023							
ORDER TIME : 8:44 AM							
ORDER NO. : 707957-010							
CUSTOMER NO: 8264125							
CHANGE OF AGENT							
NAME: PRETIOSUS, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland-sorenson EXT#							

EXAMINER:

## COVER LETTER

Division of Corporations		
Pretiosus, LLC SUBJECT:		
	Name of Limited	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to th	e following:
Lauren Kastrinos		
Name of Person		
Mannis Operations LLC		
Firm/Company		<del></del>
145 Soundings Ave., Suite 210		
Address		
Jupiter, FL 33477		
City/State and Zip Co	ode	
annette@mannisgroup.com		
E-mail address: (to be used for future	e annual report not	ification)
For further information concerning this ma	atter, please call;	
Annette Baker	561	454-8661
Name of Person	at (	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follow	wing amount:	
□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18 (2/14)		

## 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.	Na	me of the limited liability company:  Pretiosus, LLC				
2. (	145 Soundings Avenue, Suite 210			(b) 145 Soundings Avenue, Suite 210		
,	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(0)		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Jupiter. FL 33477			Jupiter, FL	33477
		04/10/2023		ı	L23000176	497
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)					
	( )	Registered Agent and Registered Office shown on the records of t Lauren Kastrinos	he Flor	ida I	Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET A	IDDRE	SS)		
		145 Soundings Avenue, Suite 210				
	Jupiter, FL_33477					
		, FL,				
(	(b)					
	• •	Enter name of NEW Registered Agent and/or NEW Registered	Office :	a <b>dd</b> i	ress:	
		Corporation Service Company				
		NEW Registered Office Address:				
	1201 Hays Street					
		Tallahassee, FL	32301			
char ager was the	nge nt w s/we arti	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	registe bility of the li imited	red con mit l lia	office and apany, it is led liability bility comp on Kastrinos	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
		ure of a member or authorized representative of a member				Printed or typed name of signee
proting the noting	visid obli nere ified	ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete proper and complete proper and complete provided by reflect a change in the registered office address. I have been also been also been also been address. I have been address and been address. I have been also been address. I have been address and been address.	re to a perfori for in ereby	ct it nan Ch con	n this capac ice of my di apter 605, firm that th	city. I further agree to comply with the sties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been

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