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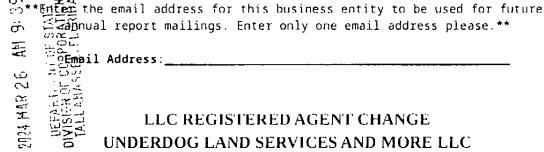
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206



Email Address:_

LLC REGISTERED AGENT CHANGE UNDERDOG LAND SERVICES AND MORE LLC

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M. SOLOMON

MAR 2 6 2024

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L N	ame of the limited liability company:	ND SERVI	JES AND MO	ORE LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	04/12/2023 Date of filing/registration in Florida		L230001804	23 Document number
5. (a)	BLYTHE, LILIANA M			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 9905 CROTTY AVENUE			
	HASTINGS	32145		. 26
(b)	Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N NEW Registered Office Address: STE 300		lress:	AH10: 01
		33702		
the cha agent v was/w	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the regis lability co of the lim	tered office mpany, it is ited liability	and the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided in
ΔΞ	NT GOMENT BY	Nat S	imith	
Signa I here provisi the obi to mer	ture of a member of authorized representative of a member by accept the appointment as registered agent and agains of all statules 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.	e performe ed för in C hereby co	ince of my c hapter 605	luties, and I am familiar with and accept , F.S. Or, if this document is being filed
I	Taylor Newman - Assistant S	ecretary		