

Florida Department of Sta

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Phone 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:

LLC REGISTERED AGENT CHANGE RANGER EYE CLUB LLC

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APR 25 2024



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	Tame of the limited liability company:	LLC		
2. (a)	4747 WEST WATERS AVE APT. 1001		(b) 4747 WEST	WATERS AVE APT. 1001
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	TAMPA, FL 33614	<u> </u>	TAMPA, FL	. 33614
	04/25/2024		1.2300018656	2
3.	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Occument number
5. (a)	Registered Agent and Registered Office shown on the records of 476 RIVERSIDE AVE. Registered Office Address (MUST BE FLORIDA STREET)			
	JACKSONVILLE , FI	3220	2	
(b)	Corporate Creations Network Inc.			2024
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office	#ddress:	2024 AFR
	801 US Highway 1			25
	NEW Registered Office Address:			Pii 6: 2
	North Palm Beach , FI	3340	8	23
chang agent was/v	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of e regist ability of the limite	the State of Flor tered office and company, it is l limited liability d liability comp	the business office of the registered nereby confirmed that the change(s) company or as otherwise provided in any.
	Strella Tavarez	-	Estrella Tavarez, A	·
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee

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.

Signature of Registered Ageny