**Division of Corporations** 

## Florida Department of

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE EDIT: DISCARD SOLUTIONS LLC

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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.

| (Note: MUST BE STREET ADDRESS)  O6/02/23  L23000189849  3. Date of filing/registration in Florida 4. Document number  Segistered Agent and Registered Office shown on the records of the Florida Dept. of State:  476 RIVERSIDE AVE.  Registered Office Address INUST BE FLORIDA STREET ADDRESS)  JACKSONVILLE  FL 32202  Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300  St. Petersburg  FL 33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the reagent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change of organization or the operating agreement of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company.  Robin Jones  Printed or typed name of squee   | N  | ame of the limited liability company: Edit: Discard Solu   | tions LLC  |  |
|--|--|--|--|--|
| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Date of filing/registration in Florida  Date of filing/registration in Florida  Joeument number  Mailing address of limited liability company (Note: MAY BE POST OFFICE BO)  Date of filing/registration in Florida  Joeument number  Mill Dept. of State:  476 Riverside Agent and Registered Office shown on the records of the Florida Dept. of State:  476 Riverside Address  MUST BE FLURIDA STREET ADDRESS)  JACKSONVILLE  FL 32202  (b) Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300  St. Petersburg  FL 33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the reagent will be identical. Or, in the case of a Plorida limited liability company, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the reagent will be identical. Or, in the case of a Plorida limited liability company, it is hereby confirmed that the change of organization or the operating agreement of the limited liability company.  Robin Jones  Printed or typed name of signee  Printed or typed name of signee  Printed or typed name of signee   | (a)  |  | (b)  |  |
| 3. Date of filing/registration in Florida 4. Document number  5. (a) UNITED STATES CORPORATION AGENTS, INC.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  476 RIVERSIDE AVE.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   JACKSONVILLE FLORIDA STREET ADDRESS)  Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300  St. Petersburg FL  33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the regent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change are made, the Florida street address of the Imited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company.  Robin Jones  Signature of a member or authorized representative of a member  Printed or typed name of signee  Thereby agreent the appaintment as registered agent and agree to get in this capacity. If further agree to comply, agreent the appaintment as registered agent and agree to get in this capacity. If further agree to comply.  |  | Principal office address of limited liability company:   |  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)   |
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| Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  476 RIVERSIDE AVE.  Registered Office Address  MUST BE FLORIDA STREET ADDRESS)   JACKSONVILLE  FL 32202  Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300  St. Petersburg  FL 33702  St. Petersburg  FL 33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the reagent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the articles of organization or the operating agreement of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company.  Robin Jones  Signature of a member or authorized representative of a member.  Printed or typed name of signee.  Thereby agreent the approximation as registered agent and given to act in this capacity. I further agree to countly.   |  | Date of filing/registration in Florida   | 4.   | Document number  |
| A76 RIVERSIDE AVE.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  JACKSONVILLE FLORIDA STREET ADDRESS)  Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300  St. Petersburg FL  STE 300  St. Petersburg FL  STE 3702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the regent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the changwas/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide articles of organization or the operating agreement of the limited liability company.  Robin Jones  Signature of a member or authorized representative of a member  Printed or typed name of signee   | (a)  |  |  |  |
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| Signature of a member or authorized representative of a member   | e cha<br>gent v<br>as/we<br>e arti         | ange or changes are made, the Florida street address of 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  | the registered of ability company, f the limited liab limited liability of the liability of th | fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in |
| I berely accept the annointment as revistered agent and agree to act in this capacity. I further agree to comply t   |  |  | Robin Jones  |  |
| notified in writing of this change.  | herei<br>ovisi<br>e obl<br>mere<br>otifice | by accept the appointment as registered agent and agri<br>ions of all statutes relative to the proper and complete<br>ligations of my position as registered agent as provided<br>ely reflect a change in the registered office address, I h<br>d in writing of this change. | performance of n<br>1 för in Chaptèr i<br>1 iereby confirm th  | vanacity. I further agree to comply with the   |
| David Roberts - Assistant Secretary Signature of Registered Agent  |  |  | ecretary   |  |