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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 **NECESSITO CAFE LLC**

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

1.	Vai	ne of the limited liability company:	C 			
2. (a)		(b)		
·	-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	•	04/18/23	_	L230001917	54	
3.	-	Date of filing/registration in Florida	4.		Document number	
5 (a)	ZENBUSINESS INC.				
5. (a)		Registered Agent and Registered Office shown on the records of the				
		336 E. COLLEGE AVE.				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		-		
		SUITE 301				
(b)		TALLAHASSEE F1	32301		- ~	
	-				2024 NeV -7	
	1) _	Northwest Registered Agent LLC		V 491		
		Enter name of NEW Registered Agent and/or NEW Registered (Office ac	<u>idress</u> :	1	
		7901 4th St N			 Pl:	
		NEW Registered Office Address:			- 	
		STE 300		22		
		St. Petersburg , FL	33702		_	
the c agent was/	har t w wei	mited liability company is not organized under the law age or changes are made, the Florida street address of a ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of eles of organization or the operating agreement of the l	the reg bility c f the lir	istered office ompany, it is nited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
		to General the	Nat	Smith		
-		are of a member or authorized representative of a member			Printed or typed name of signee	
prove the o to me	isio blig reg	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	oertorn	iance of my .	duties, and I am lamiliar with and accept	
	-/	Taylor Newman - Assistant Ser	cretary			