Florida Department of State Division of Corporations Electronia Filing Gover Sheet

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Division of Corporations

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**Enter the email address for this business entity to be used for futures:

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LLC REGISTERED AGENT CHANGE PAWOUTLAW LLC

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K. SALY

MAY - 3 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.	Na	ame of the limited liability company: PawOutlaw LLC			
2.	(a)	3200 CHAMPION RING RD		3200 CHAMPION RING RD	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	,,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		#1325		#1325	
		FORT MYERS. FL 33905	-	FORT	MYERS, FL 33905
		05/02/2024		L230002	02970
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	LEGALINC CORPORATE SERVICES INC.			
<i>J</i> .	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			iale:
		476 RIVERSIDE AVE.			
		Registered Office Address (MUST BE FLORIDA STREET	ed Office Address (MUST BE FLORIDA STREET ADDRESS)		
		JACKSONVILLE FI	32202		TALLAHASSEE, FLORIGE
	(b)	Corporate Creations Network Inc.			
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			- S9
		801 US Highway I			<u> </u>
		NEW Registered Office Address:			
					
		North Palm Beach , FI	33408		
ch ag wa	ange ent v as/we	imited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of the organization or the operating agreement of the	register ability co of the lin limited	ed office impany, i iited liabi iability c	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in
_	Signa	atrella Tavarez ture of a member or authorized representative of a member		***** 14141	Printed or typed name of signee
I pr	herei ovisi e obl meri	by accept the appointment as registered agent and aging ions of all statutes 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 did not in writing of this change.	ree to act perform d for in (hereby c	in this co ance of m Chapter 6 onfirm the	anacity I further agree to comply with the

Catralla Tavaraz Estrella Tavarez, Special Secretary Signature of Registered Agony