Florida Department of State Division of Corporations Electronic Killing Cover Sheet 1 2 3

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(((H240001672013)))



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	To:	Division of Corporations Fax Number : (850) 617-6383	五二
S S	PH 12: 50 Ur STATE PORATIONS T	Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561) 694-8107 Fax Number : (561) 214-8442	1-8 24 51
Section 2000	CO TOBAN	the email address for this business entity to be used for future inval report mailings. Enter only one email address please.**	- -

THE PAIR OF THIEVES LLC

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K. SALY

MAY - 9 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	ame of the limited liability company: the pair of thieves	LLC				
2. (a)	895 Riverside Dr Unit D352	(b) 895 Riverside Dr Unit D352				
¥. (u)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	Mailing address o	f limited liability company: E POST OFFICE BOX)			
	Wenatchee, WA 98801	Wenatchee, WA 98801				
	05/01/2023	L23000214231				
3.	Date of filing/registration in Florida	4. Document nur	mber			
5. (a	LEGALINC CORPORATE SERVICES INC.					
φ. (u		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	476 Riverside Ave.					
(b)	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	TALLAHASSEC, FLORID			
	Jacksonville, FI	32202	X-8			
	Corporate Creations Network Inc.		开。 至			
·	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	921			
	801 US Highway 1		5.00			
	NEW Registered Office Address:					
	North Palm Beach , FI	33408				
chang agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	registered office and the business ability company, it is hereby confir of the limited liability company or a	office of the registered med that the change(s)			
	Kristen Espinales	Kristen Espinales, Attorney-in-F	act			
Sign	ature of a member or authorized representative of a member	Printed or typed	name of signee			
provis the ob to me	by accept the appointment as registered agent and ag iions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	performance of my duties, and I ar	n familiar with and accept			
	Kristen Espinales Kristen Espinales, Special Secretary					

Signature of Registered Agent