Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 VANLANE HOLDINGS LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY α

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: VANLANE HOLDIN	NGS LLC	
2. (a)		(b) _	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of timited liability company: (Note: MAY BE POST OFFICE BOX)
•	05/10/23		23000231230
3.	Date of filing/registration in Florida	4.	Document number
5. (a	/		
	Registered Agent and Registered Office shown on the records of the	he Florida Do	Dept. of State:
	336 E. COLLEGE AVE.	has seen	
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDKESS)</u>	2
	SUITE 301		2024 7.278
	TALLAHASSEE	32301	
(b)	Registered Agents Inc		26
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	ress:
	7901 4th Si N		
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg , FL	33702	
the chagent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law $f = \frac{1}{2}$	the registed bility completed the complete t	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
Sign	Rulet as June 24 ature of a member or authorized representative of a member		Printed or typed name of signee
I here provi: the ob- to me	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a finitely of this change.	performand I för in Che ereby conf	in this capacity. I further agree to comply with the

Signature of Registered Agent