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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

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

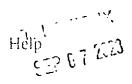
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## LLC REGISTERED AGENT CHANGE **S&S SOLUTIONS GROUP LLC**

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Fax: 813436

## 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 Statides, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	time of the limited liability company.	roup LLC	·	
2. (a)		(b)		
<u>.</u> . (d)	Principal office address of limited habitity company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	06/14/23	L2300	00288181	
3.	Date of filing/registration in Florida	<del>-</del>	Document number	
5. (a)	SMITH, SHAKA			
Registered Agent and Registered Office shown on the records of the Florida Dept. of State				
	300 SOUTHEAST 2ND STREET			
	Registered Office Address			
	SUITE 600			
	FORT LAUDERDALE	L. 33301	<b></b>	
(b)	Registered Agents Inc  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office addr <u>ess</u> :		
	7901 4th St N		<u> </u>	
	NEW Registered Office Address:		9632	
	STE 300			
	St. Pelersburg	33702 T.	cn ·	
the charge agent was/w the art Signa Phera provise the obto mer notific	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the state of a member of authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and completingations of my position as registered agent as provided verification of this change in the registered office address, d'in writing of this change.	of the registered liability compared to act in the performance led for in Chap I hereby confin.	I office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.  Printed or typed name of signee  its capacity. I further agree to comply with the of my duties, and I am familiar with and acceptor 605, F.S. Or, if this document is being filed	
	明点	Secretary		

Signature of Registered Agent

9/5/2023 12.29 30 PDT \* \* \* \*