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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

ff the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** برمدار المحافظ Address:_ المحافظ المح

LLC REGISTERED AGENT CHANGE MAGNA REALTY GROUP 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 Floridg.

1.	Na	me of the limited liability company: <u>MAGNA_REAL</u>	<u>.TY G</u>	<u>ROUP LLC</u>	<u> </u>		
2.	(a)		(b))			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (-	М	ailing address of limited (<u>Note: MAY BE POST</u>		
			-			·	
		06/30/2023	_	L230003	14549		
3.		Date of filing/registration in Florida	4.	I	Document number		
5.	(a)	UNITED STATES CORPORATION AGENTS Registered Agent and Registered Office shown on the records of the					
476 RIVERSIDE AVE.							
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
		JACKSONVILLE , FL_	32202	2			
	(b)	Registered Agents Inc					
	(-)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	lress:			
		7901 4th St N					
NEW Registered Office Address: STE 300							
					U	· · ·	2
							923
		St. Petersburg , FL	33702			ر ر	2023
the ago	ent w ent w s/we arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cless of organization or the operating agreement of the limits.	ne regis ility con the limi	tered office a mpany, it is l ited liability	and the business off hereby confirmed th company or as other	ice of th at the:c]	e registered hangë(s)
1	اد مون	ure of a member or authorized representative of a member	-	Ţ	Robin Jones	Siener	
I I pro the to	nerci ovisi obl mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po- igations of my position as registered agent as provided poly thy reflect a change in the registered office address, I he I in writing of this change.	e to act erforma for in C reby co	in this canac	rity I further garce	to comi	oly with the and accept being filed has been

David Roberts - Assistant Secretary
Signature of Registered Agent