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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number

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LLC REGISTERED AGENT CHANGE LIVESSIMPLY LLC

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K. SALY SEP - 1 2023

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.

i.	Na	ame of the limited liability company: LIVESSIMPL	Y LLC		
2.	(a)		(b) _		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
2		07/24/2023		L23000348671	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	OLIVO, YORIBALDIS			
		Registered Agent and Registered Office shown on the records o			
		6805 WEST COMMERCIAL BOULEVARD			
		Registered Office Address (MOST BE FLORIDA STREET			
		UNIT 1227			7:
		TAMARAC	ı <u> 33319</u>	29 PH 2: 39	=
		Burian and Assessed			
	(b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registere	d Office addre		į
		The state of the s	II VIII C IIII	<u> </u>	
		7901 4th St N		<u>.</u>	
		NEW Registered Office Address:			
		STE 300			
		Ct. Data selver	00700	·	
		St. Petersburg . F	1. 33702	· 	
the ag wa the	e cha ent v as/wi e arti	imited liability company is not organized under the lainge or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the register iability comp of the limite	ered office and the business office of the regist upany, it is hereby confirmed that the change(s' ted liability company or as otherwise provided.	ered)
	<u> </u>	fure of a member or authorized representative of a member		Robin Jones Printed or typed name of signee	
-l pr	here ovisi	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete	rree to act in e performan	n this capacity. I jurther agree to comply with nee of my duties, and I am Jamiliar with and ac	the cept

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am lamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent