

L23000406961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

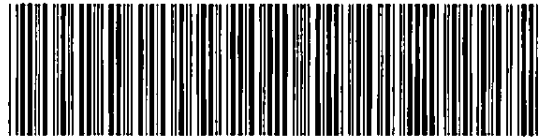
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



200427723412

04/26/24 -01010- -015 **25.00

FILED
2024 APR 26 AM 7:21
SECURITY
TALL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pioneer Industrial Partners, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Derek Riggleman

Name of Person

Pioneer Industrial Partners, LLC

Firm/Company

100 East Pine Street, Suite 110

Address

Orlando, FL 32801

City/State and Zip Code

acquisitions@pioneeringindustrial.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Derek Riggleman

407

456-3463

at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: Pioneer Industrial Partners, LLC

2. (a) 100 East Pine Street, Suite 110, Orlando, FL 32801

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 100 East Pine Street, Suite 110, Orlando, FL 32801

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

8/30/2023

3. Date of filing/registration in Florida

L23000406961

4. Document number

5. (a) Derek Riggleman

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1190 Sugar Belt Drive

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Saint Cloud

FL 34771

(b) Boston PLLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

C/o Wiley Boston

NEW Registered Office Address:

2111 E. Michigan Street, Suite 136

Orlando, FL 32806

FILED
2024 APR 26 AM 7:21
SEC. OF STATE
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Derek Riggleman

Printed or typed name of signee

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 familiar 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.

Wiley Boston
Signature of Registered Agent