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To:

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

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE UNIVERSE HOLDINGS 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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Na	une of the limited liability company: UNIVERSE HOLD	DINGS LLC	
. (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)
	09/06/23	L230	000424401
	Date of filing/registration in Florida	4.	Document number
(a)	GLOVER, TOM		
(14)	Registered Agent and Registered Office shown on the records of	the Florida Dept	of State:
	7901 4TH STREET NORTH		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<del></del>
	SUITE 300		7
	SAINT PETERSBURG	33702	
			<del></del>
(b)	Northwest Registered Agent LLC		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	7901 4th St N		<i>i</i> i,
	NEW Registered Office Address		- <u></u>
	STE 300		
	St. Petersburg , FL	33702	
he li	mited liability company is not organized under the law	vs of the State	of Florida, it is hereby confirmed that after
ent w s/we	nge or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited liage reauthorized by an affirmative vote of the members of the organization or the operating agreement of the	ibility compai f the limited l	ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	Yest Swatch	Nat Smith	
ignati	are of a member or authorized representative of a member		Printed or typed name of signee
ovisic Pobli mere	y accept the appointment as registered agent and agrous of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	performance of for in Chapt dereby confirm	its capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed in that the limited liability company has been
	Taylor Newman - Assistant Se	cretary	