Flotigla Department of State

Division of Corporations

Division of Corporations

Electronic Filling Govern Sheet

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To:

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

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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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.

2. (a)		(b)	
	Principal office address of limited liability com (Nate: MUST BE STREET ADDRESS)	ipany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	09/13/23	L230	00427482
۱.	Date of filing/registration in Florida	4.	Document number
5. (a)	ZENBUSINESS INC.		
	Registered Agent and Registered Office shown on the r	records of the Florida Dept.	of State
	336 E. COLLEGE AVE. SUITE 301		
	Registered Office Address (MUNT BE FLORIDA)	STREET ADDRESS)	
(1)	TALLAHASSEE		
	Registered Agents Inc		TEMES 21 M
	Enter name of <u>NEW Registered Agent</u> and or <u>NEW R</u>	Registered Office address:	
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	. FL 33702	
			
ie chai gent w vas/we	mited liability company is not organized unde nge or changes are made, the Florida street ad ill be identical. Or, in the case of a Florida li re authorized by an affirmative vote of the me	ldress of the registered mited liability compar embers of the limited l	loffice and the business office of the registery, it is hereby confirmed that the change(s) lability company or as otherwise provided in
(e-y	tles of organization or the operating agreemer		
رُجي)رتـــرُ Signati	are of a member or authorized representative of a memb		Printed or typed name of signee
herch	y accept the appointment as registered agent ons of all statutes relative to the proper and c gations of my position as registered agent as by reflect a change in the registered office ade	and agree to act in th	is canacity. I firstly away to comply with