Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

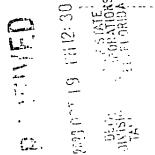
From:

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.\*\*

Email Address:\_\_



## LLC REGISTERED AGENT CHANGE **GROUND ORGANIZATION 2023 LLC**

Certificate of Status	0
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OUI 19 2023

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

To: 18506176383

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. N	ame of the limited liability company:  GROUND ORGA	NIZATION 2023	3 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)
	09/14/2023	L230	00428642
3.	Date of filing/registration in Florida	4.	Document number
5. (a	GLOVER, TOM		
	Registered Agent and Registered Office shown on the records of	the Florida Dept	of State:
	7901 4th St N		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<del></del>
	STE 300		
	St. Petersburg . FI		
(b)	Northwest Registered Agent LLC		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg , FL	33702	
the chagent was/w the ar Sign I here of the off to men	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the lattice of a member of authorized representative of a member oby accept the appointment as registered agent and agrains of all statutes relative to the proper and complete originations of my position as registered agent as provide rely reflect a change in the registered office address. I are in writing of this change.	f the registered ability compared the limited limited limited limited was Smith	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.  Printed or typed name of signee his canacity. I further agree to comply with the

Signature of Registered Agent

- Assistant Secretary

Taylor Newman