

Help

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. Na | ane of the limited liability company: Florida | Divisio | on 10, I | LC | |
|--|---|--|---|---|--|
| 2. (a) | 7901 4th St N | ሰ | ₂₎ 7901 4 | th St N | |
| - (., | Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) | · · · · · · | · ···· | Aailing address of limited Hability company: (<u>Note: MAY BE POST OFFICE BOX</u>) | |
| | STE 300 | | STE 300 St. Petersburg, FL 33702 | | |
| | St. Petersburg, FL 33702 | <u> </u> | | | |
| | 09/22/23 | , | L2300 | 0442311 | |
| 3. | Date of filing/registration in Florida | ÷ , 4. | | Document number | |
| 5. (a) | INC AUTHORITY RA | 1 1 | | | |
| (0) | stered Agent and Registered Office shown on the records of the Florida Dept. of Sta 10 NORTH ORANGE AVE., STE 2300-N istered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | |
| | ORLANDO | . _{FL} 32801 | L | SECRET IN | |
| | Registered Agents Inc | | | | |
| | 7901 4th St N | | | MHI: 46 | |
| | NEW Registered Office Address: STE 300 | | | | |
| | St. Petersburg | _, FL_33702 | 2 | | |
| the cha agent w was/we | imited liability company is not organized under the nge or changes are made, the Florida street addres vill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the memb cless of organization or the operating agreement of | ss of the regised liability co ers of the lim | stered office ompany, it is nited liability | and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in | |
| Signature of a member or authorized representative of a member | | | Robin Jones | | |
| - | • | | in this area | Printed or typed name of signee | |
| provisi | by accept the appointment as registered agent and ons of all statutes relative to the proper and comp | stere perform | ance of my | lucies, 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. J dreits riid

David Roberts - Assistant Secretary

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00