L23000442361

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone #)			
	WAIT MAIL			
(Bu	siness Entity Name)			
(Do	cument Number)			
Certified Copies	_ Certificates of Status			
Special Instructions to Filing Officer:				
	Office Use Only			









A. RAMSEY

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	I2000000195	
	REFERENCE	:	840068	7681421
	AUTHORIZATION	:	11	×7
	COST LIMIT	:	s 25.00%22	Shell all
ORDER DATE :	December 16, 202	4		
ORDER TIME :	12:59 PM			
ORDER NO. :	840068-103			
CUSTOMER NO:	7681421			
	--	- - -		

CHANGE OF AGENT

NAME: WEEHOO CONSPIRACY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER: _____

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 company: (<u>Note: MUST BE STREET ADDRESS</u>)		Ν	Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)	
	1615 WOODWARD ST		PO Box 7		
	ORLANDO, FL 32803		Winter Pa	rk, FL 32790	
	09/13/2023		L23000442	2361	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records	of the Flori	da Dept. of State	:	
	ASSURED COMPLIANCE SERVICES, LLC			· · · · · · · · · · · · · · · · · · ·	
	Registered Office Address (MUST BE FLORIDA STREE	TADDRE	<u>SS)</u>		
	1615 WOODWARD ST			EC -	
	ORLANDO	512803	· · · · · · · · · · · · · · · · · · ·	MRA DEC 18 P	
(1-)				STATE D	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	uddress:		
	Corporation Service Company				
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee	FL_32301			
change agent v was/we	imited liability company is not organized under the least of changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the street of the case of the street	laws of the he registe liability of s of the li	e State of Flo red office and company, it is mited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/s/ P	hilip K. Calandrino	Pł	nilip K. Calanc	Irino, Authorized Person	

Signature of a member or authorized representative of a member

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. Signature of Registered Agent

Signature of Registered Agent

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