Division of Corporations



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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 SAO MAI 79 LLC

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10/18/2023 08:05:09 PDT To: 18506176383 Page: 2/2 From: Registered Agents Inc Fex: 8134365206

## 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. No	ame of the limited liability company:	<u> </u>			
2. (a)	7901 4th St N	(b) <sup>7901</sup> 4th St N			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		tailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	STE 300	STE 300			
	St. Petersburg, FL 33702	St. Petersbu	St. Petersburg, FL 33702		
	10/01/23	L2300045385	9 `_		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	PHAN, NGUYEN		<u>.</u> .		
	Registered Agent and Registered Office shown on the records of the	a frail. 2			
	Registered Office Address (MUST BE FLORIDA STREET A				
	3227 CARPENTARIA DR	3			
	NEW SMYRNA BEACH	32168			
(b)	Northwest Registered Agent LLC				
·	Enter name of NEW Registered Agent and/or NEW Registered (	Mice address:			
	7901 4th St N				
	NEW Registered Office Address:				
	STE 300	<del></del>			
	St. Petersburg . FL	33702			
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lialere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	he registered office bility company, it is the limited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	Wat ength	Nat Smith			
_	ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had to writing of this change.	performance of my d for in Chapter 605, ereby confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been		
,	Taylor Newman - Assistant Sec	cretary			

Signature of Registered Agent