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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 UPLIVING LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY $^{4}$

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.

l. N	ame of the limited liability company: UPLIVING LLC			· · · · · · · · · · · · · · · · · · ·
!. (a)		ĺ	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)
	7901 4th St N STE 300	_	7901 4th :	St N STE 300
	St. Petersburg FL 33702	St. Peter		sburg FL 33702
	10/02/23		L23000454	921
	Date of filing/registration in Florida	4.		Document number
. (a)	REGISTERED AGENTS, INC.			
(b)	Registered Agent and Registered Office shown on the records of the			
	7901 4TH STREET N			_
	Registered Office Address [MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	_
	SUITE 300			_
	ST. PETERSBURG .FL	33702		
				- 
	Northwest Registered Agent LLC		<b>25</b> All	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			AR J
	7901 4th St N			FILI 2025 JAN 29 SEGRITARY FALLAHASSE
	NEW Registered Office Address:			
	STE 300			- <b>3.1 8.</b>
				- 30 A
	St. Petersburg	33702		,- <del>-</del>
ie cha gent v as/wo	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	he reg bility c the lir	istered offic ompany, it i nited liabilit	c and the business office of the register is hereby confirmed that the change(s) by company or as otherwise provided in
	WWT S-MWTh/ ture of a member or authorized representative of a member			Nat Smith
Signa	ture of a member or authorized representative of a member		•	Printed or typed name of signee
rovisi ie obl i merc	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change.	e to ac perforn for in erchy o	t in this cap lance of my Chapter 60: confirm that	acity. I further agree to comply with the duties, and I am familiar with and acce 5. F.S. Or, if this document is being file the limited liability company has been
	Taylor Newman - Assistant Se	cretary		