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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 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 PREMIUM GLOBAL AUTOMOTIVE LLC

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K. SALY

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## 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	me of the limited liability company:				
2. (a)	6321 DOGWOOD DR	(b) 6321 DOGWOOD DR			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	.\		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	Milton FL		Milton FL		
	32570	32570			
	10/31/23		L23000495	383	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	UNITED STATES CORPORATION AGENTS, INC.				
	Registered Agent and Registered Office shown on the records of the 476 RIVERSIDE AVE.  Registered Office Address (MUST BE FLORIDA STREET AL				
	JACKSONVILLE FL	32202		DCT 30 P	
(b)	Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered C	 )ffice ad	dress:	PILLAHASSEE, FLORIDA	
	7901 4th St N	-		28 28	
	NEW Registered Office Address:			_	
	STE 300			_	
	St. Petersburg, FL	33702		_	
the cha agent w was/we the artic	mited liability company is not organized under the laws nge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	he regi- oility co the lim imited l	stered officompany, it nited liabilities in the second nited liability contracts	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
~-	ure of a member or authorized representative of a member	Rob	in Jones	District Control of Control	
I herel provision the obli to mere	oy accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	erform for in C erchy c	in this cap ance of my Chapter 60 onfirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	