Fax: 8134365206

To: 18506176383

below) on the top and bottom of all pages of the document. (((H25000008693 3)))



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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE MIND POP, LLC

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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: MIND POP, LLC						
2. (a	a 1	7901 4th St N STE 300		(b) 7901 4th St N STE 300				
2. (a)		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		St. Petersburg FL 33702 US		St. Petersi	burg FL 33702 US			
		11/17/2023		L23000517	· · · · · ·			
3.		Date of filing/registration in Florida	4.		Document number			
5. (	۸ ۱	C T CORPORATION SYSTEM						
J. (	21 )	Registered Agent and Registered Office shown on the records of the			te:			
		1200 SOUTH PINE ISLAND ROAD				r-01		
		Registered Office Address (MUST BE FLORIDA STREET AD	DRES.	<u>27</u>	芒	2025 JAN		
						سب معتر	$\neg \eta$	
		PLANTATION , FL 3	3324			<b>7</b> 2	FILED	
(l	o) .	Northwest Registered Agent LLC			ALLAHASSEC ELDAD	PH 3	D	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	nice ac	igress:		3: 08		
		7901 4th St N			_			
		NEW Registered Office Address:						
		STE 300			_			
		St. Petersburg , F1. 3	3702		_			
the cagen was/	ha t w we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the line	ie regi ility c ihe lin	stered offic ompany, it i nited liabilit	e and the business offic is hereby confirmed that ty company or as others	e of the re	egistered	
. /	_	we of a member or authorized representative of a member	<u>Nat</u>	Şmith				
_					Printed or typed name of s			
prov the o to m notif	isio bli ere îya	or accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided f by reflect a change in the registered office address, I he I in writing of this change.	to ac erform för in reb <u>v</u> c	t in this cap ance of my Chapter 60, confirm that	pacity. I further agree to duties, and I am familie 5, F.S. Or, if this docum the limited liability com	o comply ar with an nent is bei npany has	with the d accept ing filed been	
r~ /l	/	Taylor Newman - Assistant Secr	etary					

Signature of Registered Agent