L23000534933

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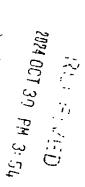
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2024 OCT 30 RM 9: 34

SECRETARY OF STATE
INLLABRULE LITERARY



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 729550 _ 8462605

AUTHORIZATION

COST LIMIT : \$'25.10

ORDER DATE: October 29, 2024

ORDER TIME : 2:11 PM

ORDER NO. : 729550-012

CUSTOMER NO: 8462605

CHANGE OF AGENT

NAME: FLASHFUND LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED 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.

1. Na	ame of the limited liability company: FLASHFUND L	LC					
2. (a)		(H	o)				
(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)				
	7901 4th st n. ste 300		7901 4th				
	st petersburg, FL 33702	_	st peters	ourg, FL 33702			
	11/30/2023		L23000534933				
3.	Date of filing/registration in Florida	4.		Document	numb	er	
£	-						
5. (a)	Registered Agent and Registered Office shown on the records of REGISTERED AGENTS INC	f the Florida	i Dept. of Sta	te:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	F	~~~~~~	
	7901 4th St N STE 300				SEC ALL	024 SEC	
	St. Petersburg, F	33702		FIL 2024 OCT 30 SECRFIAN SECRFIAN			
					"zi.iz.iruai)#1.w	T 30 AM	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				\$	F ST.	
	Corporation Service Company					: 35 S	
	NEW Registered Office Address.	,		_	'	<i>62</i> ,	
	1201 Hays Street			_			
	Tallahassee	32301					
change agent v was/w	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registere iability co of the lim	ed office ar impany, it i iited liabili	id the busing is hereby co ty company	ess off ntirme	ice of the registered ed that the change(s)	
	tk Eisner	Zac	k Eisner				
_	iture of a member or authorized representative of a member			Printed or ty	•	-	
provisi the obi to mer	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	ree to act e performe ed for in C hereby co	in this cap ance of my hapter 60, onfirm that	acity. I furt duties, and 5, F.S. ()r, t the limited	her ag Lam få f this d liabilit	gree to comply with the amiliar with and accept document is being filed by company has been	
X	vace tokuble						
Signatu	ire of Registered Agent Grace E. Kirby, Asst. Vice Pre	sident					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00 729550