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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

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LLC REGISTERED AGENT CHANGE **ODYSSEY MULTISPORT 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.

L N	ame of the limited liability company:	n LLC 	
2. (a)		(b)	
·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of fimited liability company: (Note: MAY BE POST OFFICE BOX)
	3691 Meadow Vista Ln	7901 4th	St N STE 300
	Tallahassee FL 32308	St. Peters	sburg, FL 33702
	01/26/24	L24000049	9749
3.	Date of filing/registration in Florida	4.	Document number
5. (a	ZENBUSINESS INC.		
J. (II	Registered Agent and Registered Office shown on the records of		
	336 E. COLLEGE AVE.		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		_
	SUITE 301		
	TALLAHASSEE , FL	32301	_ 2
(b)	Northwest Registered Agent LLC		APPRO AN 17 2025 JAN 17 SEGRETAR
, ~ ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	7901 4th St N		eed = 14 City (mg bill)
	NEW Registered Office Address:		AMII:
	STE 300		: 26
	St. Petersburg , F1	33702	<u>.</u>
the ch agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited likere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered offi ability company, it of the limited liabil	ice and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in impany.
	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and agrions 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 have an arrived in writing of this change.	ree to act in this ca performance of m d for in Chapter 60 hereby confirm tha	pacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
1	Taylor Newman - Assistant Se	ecretary	

Signature of Registered Agent