Florida Department of State Privision of Corporations Electronic Filling Cover She

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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 FILEU H. 34

Fax: 2083526281

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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PECFIVED 125 JAN - 2 PH 1: 27 DEPARTMENT STATE VISION OF CORPORATIONS TALLALALASEE FLORIDA

LLC REGISTERED AGENT CHANGE WILLYUMS INVESTMENT LLC

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K. SALY

JAN 3 2025

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. Na	une of the limited liability company:	ESIMENT L		·				
2. (a)		(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. Petersburg FL 33702					
	02/01/24	L	2400007277					
3.	Date of filing/registration in Florida	- -		Document number				
5. (a)	WILLIAMS, ARIC							
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State							
	633 W 51H STREET, 26TH FLOOR							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
				5. 2				
(b) <u>-</u>	LOS ANGELES, F	L_90071		The second second				
	Registered Agents Inc			F-2 P				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office addr	ess'	P. C				
	7901 4th St N			FILEU PH 4: 34 PALLAHASSEE FI GRID				
	NEW Registered Office Address:							
	STE 300							
	St. Petersburg, F	1. <u>33702</u>						
the cha agent was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regist hability con of the limit e limited lia	ered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in				
<u>الإسراب</u> . Sienai	ture of a member or authorized representative of a member			Printed or typed name of signee				
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It in writing of this change. David Roberts - Assistant 8			•				
	re of Registered Agent	. ,						