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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

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

္တင္Camail Address:______

LLC REGISTERED AGENT CHANGE MINTKEY SOLUTIONS LLC

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M. SOLOMON

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. N	ame of the limited liability company. MINTKEY SOLU	JTIONS LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: Onote: MAY BE POST OFFICE BOX)			
	02/12/2024 Date of filing/registration in Florida		000076254	··	
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	ZENBUSINESS INC.				
	Registered Agent and Registered Office shown on the records of	ol the Florida Dep	t, of State		
	336 E. COLLEGE AVE.			2024	
	Registered Office Address (MUST BE FLORIDA STREE)	(ADDRESS)			
	SUITE 301			FEB 2	= H
	TALLAHASSEE	1_32301			
(b)	Northwest Registered Agent LLC	•		PM 12: 50	C
	Enter name of NEW Registered Agent and/or NEW Register	:	54 54		
	7901 4th St N				
	NEW Registered Office Address:	•			
	STE 300				
	St. Petersburg	7], 33702			
the cha agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the Stat of the registere liability compa	d office and the business of my, it is bereby confirmed t liability company or as oth	fice of the re hat the chang	gistere ge(3)
24	ture of a thember or authorized representative of a member	Nat Smith	1		
Sien	nine of a member or authorized representative of a member	- 2 mg - mg 11(3)	Printed or typed name of	if signee	

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

- Assistant Secretary

Taylor Newman

Signature of Registered Agent