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Florida Department of State

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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

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Email	Address:			
CILIDATE	MUULESS.			

LLC REGISTERED AGENT CHANGE NEXUSOPS, 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.

N.	ane of the limited liability company: NexusO	OS		
(a)	7901 4th St N	(b) 7	7901 4th St N	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	STE 300	STE 300		<u>C 17(2,1</u>)
	St. Petersburg, FL 33702		t. Petersburg, FL 33702	
	02/12/24	L	24000077161	
	Date of filing/registration in Florida	4.	Document number	
(a)	ATASSI, FIRAS RUSSEL			
` '	Registered Agent and Registered Office shown on the records of	pt. of State:		
	10951 GULF SHORE DRIVE, UNIT 9	02		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	NAPLES FI	34108		
(b)	NAPLES Northwest Registered Agent I		2.7.	
(Ն)		LC	5.7. O.	
(b)	Northwest Registered Agent I	LC	5.7. O 10	
(b)	Northwest Registered Agent Enter name of NEW Registered Agent and/or NEW Registered	LC		
(b)	Northwest Registered Agent Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N	LC	•	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

マイスク なかり かかりがた	Nat Smith
Signature of a morehor or authorized corresponders a of a morehor	Printed or typed name of signer

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby 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.

Taylor Newman - Assistant Secretary

Signature of Registered Agent