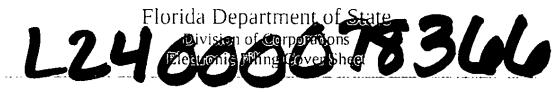
Division of Corporations



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H240000668020ADC

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 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.\*\*

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## LLC REGISTERED AGENT CHANGE HOOKED ON SHARKS LLC

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2/19/2024 Q6:52/27 PST To 18506176383 Page: 2/2 From: Registered Agents Inc Fax: 8134365206

## 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.

1. Ni	ame of the limited liability company:	Sharks					
2. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		Mailing add	Mailing address of limited liability company:  (Nate: MAY BE POST OFFICE BOX)			
	02/13/24		000078366				
3.	Date of filing/registration in Florida	4.	Docume	nt number			
5 ()	STANIFER, ETHAN						
5. (a)	Registered Agent and Registered Office shown on the reco						
	11045 BRISTOL BAY DRIVE			2 <b>024</b>			
	Registered Office Address (MUST BE FLORIDA ST.)	REET ADDRESS)		2024 FEB	n		
	APT 803			B 19			
	BRADENTON	. FL_34209	<u> </u>	9 P	$\Box$		
(b)	Northwest Registered Agent LLC  Enter name of NEW Registered Agent and/or NEW Reg		<u></u>	FEB 19 PM 4: 03			
	7901 4th St N						
	NEW Registered Office Address:		<del></del>				
	STE 300						
	St. Petersburg	PL. <mark></mark>					
the cha agent v was/we	imited liability company is not organized under singe or changes are made, the Florida street addrivil be identical. Or, in the case of a Florida limbre authorized by an affirmative vote of the memores of organization or the operating agreement	ress of the register ited liability comp ibers of the limited of the limited liab	ed office and the any, it is hereby of Hiability compan ility company.	business office of the registe confirmed that the change(s)	ered )		
Simo	ture of a member or authorized representative of a member	Nat Smit		typed name of signee			
Theres provisi the obl to mere	by accept the appointment as registered agent are for sof all statutes relative to the proper and configutions of my position as registered agent as preliced a change in the registered office address of this change.	npleùe performane rovided for in Chu ess, I herchy confi	this capacity. I fi e of my duties, an	in ther agree to comply with ad I am lamiliar with and acc	cent		
/ T- /	Taylor Newman Assis	stant Secretary —					