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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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LLC REGISTERED AGENT CHANGE NC CLUB 1003, LLC

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DEPARTMENT OF STATE

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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

	ame of the limited liability company:		
(a)	Principal office address of limited Hability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7900 GLADES ROAD SUITE 435	7900 GLADES ROAD SUITE 435	
	BOCA RATON, FL 33-434	BOCA RATON, FL 33434	
	02/14/2024		4000079569
	Date of filing/registration in Florida		Document number
(a)	Registered Agent and Registered Office shown on the records of the W. RODGERS MOORE, P.A.	he Florida De	pt of State:
	Registered Office Address (MUST BE FLORIDA STREET.)		
	7900 GLADES ROAD SUITE 435		
	BOCA RATON, FL.		JA-2 PA
(b)	C.F. Corporation System		SSEE PI
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	FILEU PH 4: 35 FALLAHIA SSET, FLORIU
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation FL	33324	
cha ent v s/we arti ignar	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating agreement of the latter of a member or anthorized representative of a member of the latter of a member or anthorized representative of a member of the latter of a member or anthorized representative of a member of the latter of a member or anthorized representative of a member of the latter of a member of anthorized representative of a member of the latter of a member of anthorized representative of a member of the latter of the lat	the registered bility complete limited liability and liability and liability and liability are to act in a section of the liability and liability are to act in a section of the liability are to act in a section of the liability are to act in a section of the liability are to act in a section of the liability are to act in a section are the liability are to act in a section are the liability are the liabil	ed office and the business office of the register rany, it is hereby confirmed that the change(s) is liability company or as otherwise provided in ility company. E.J. Friday Printed or typed name of signee

To