Division of Corporations



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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  $\mathcal{L}_{\mathbf{z}}$ annual report mailings. Enter only one email address please.\*\*

्द्मmail Address:\_

## LLC REGISTERED AGENT CHANGE 5542 INVESTMENTS LLC

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12/17/2024 12:01 45 PST• , To: 18506176383 Page: 2/2 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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Ni	nne of the limited liability company:	ENTS LLO	; 				
2. (	(a)	7901 4th St N STE 300	1	(b) /901 4th St N STE 300				
`	. ,	Principal office address of limited liability company.  (Note: MUST BE STREET ADDRESS)				ailing address of the (Note: MAY BE P		
		St. Petersburg FL 33702		SI.	Petersbur	rg FL 33702		
		03/07/2024	<del></del>	L240	00110613	3		
3.		Date of filing/registration in Florida			10	оситен пить	)er	
5.	(a)	INCORP SERVICES, INC.						
J. (6)	(01	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		3458 LAKESHORE DR						
		Registered Office Address [MOST BE FLORIDA STREET	ADDRES	<u>(5)</u>				
		LOXAHATCHEE	L_33470				, _	
								•
(b	b)							-
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	<u>d Office a</u>	<u>ddress</u> :			•	
		7901 4th St N					€ <sup>±±</sup>	
		<u>NEW</u> Registered Office Address:						
		STE 300						
		St. Petersburg	. 33702 1					
the age was	cha ni v /wo	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 large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the reg liability of of the li	isterec Compai mited l	Loffice a ny, it is b liability o	and the business nereby confirme company or as o	s office of the ed that the cha	registered inge(s)
		ture of a member or authorized representative of a member	Na -	t Smith				
						rinted or typed nar		
I he prov the to n noti	erel visi obl pera fica	by accept the appointment as registered agent and acons of all statules relative to the proper and completing ations of my position as registered agent as provided in the registered office address. If in writing of this change.			nis capac of my du ter 605, l m that the	ity. I further ag ities, and I am f F.S. Or, if this e limited liabili	gree to compliamiliar with a document is h ity company h	y with the ind accept being filed as been
Sign	natui	Taylor Newman - Assistant S ry of Registered Agent	Secretary					