To: -18506176383

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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE DE GROODT HOLDINGS LLC

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Fax: 18134365206

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. Na	ame of the limited liability company:	DINGS L	LC	<u> </u>	
2. (a)	7901 4th St N		(b) 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		
	St. Petersburg FL 33702 St. Pe		St. Petersl	burg FL 33702	
	04/15/24		£24000177421		
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	ZENBUSINESS INC.				
· (4)	Registered Agent and Registered Office shown on the records of the	te:			
	336 E. COLLEGE AVE.			_	
	Registered Office Address (MUST BE FLORIDA STREET A	-			
	SUITE 301				
	TALLAHASSEE , FL 32301				
(L)	Registered Agents Inc	7.28 1.28			
(b)	Enter name of NEW Registered Agent and/or NEW Registered	- : : : : : : : : : : : : : : : : : : :			
	7901 4th St N				
	NEW Registered Office Address:				
	STE 300	_			
	St. Petersburg . FL	33702			
the cha agent v was/wo the arti	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 lia cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limits of a member or authorized representative of a member	the regis bility co I the limi limited li	tered offic mpany, it i ted liabilit	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in inpany.	
Signature of a member or authorized representative of a member				Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I have the provided of the property of this change.	performa I för in C ereby co	in this cap nce of my hapter 60, nfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
	David Roberts - Assistant Sere of Registered Agent	cretary			