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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

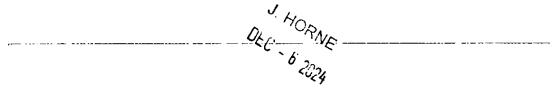
: (813)436-5206

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LLC REGISTERED AGENT CHANGE TYNDALL EFFECT LLC

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12/5/2024 v3.17 49 PST To: 18506176383 Page: 2/2 From: Registered Agents Inc Fax: 2083526281

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. N	ame of the limited liability company:	F LLC				
2. (a)		(b)				
_, (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	7901 4th St N STE 300	7901 4th St N STE 300				
	St. Petersburg FL 33702	St. Petersburg FL 33702				
	04/30/24	L24000202282				
3.	Date of filing/registration in Florida	4. Document number				
5. (a	LEGALCORP SOLUTIONS, LLC	DES F.				
J. (II	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State:				
	3440 W HOLLYWOOD BLVD. SUITE 415	7 P. O				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	HOLLYWOOD FL	4. Document number the Florida Dept. of State: 4. Document number the Florida Dept. of State:				
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:				
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg	33702				
the chagent was/w	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li	ws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company. Robin Jones Printed or typed name of signee				
I here provis the obto men notific	ehy accept the appointment as registered agent and agr	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept d for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been				