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Account Name	:	REGISTERED AGENTS	INC.
Account Number	:	120090000081	
Phone	:	(307)200-2803	
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JUN 1 0 2024 K. Brumbley

To: 18506176383

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

N	ame of the limited liability company:		
(a)		(b)	
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
	05/02/24	L2400	00206972
(a)	Date of filing/registration in Florida SUFYAN, ABU	4.	Document number
	Registered Agent and Registered Office shown on the records of 1065 SW	the Florida Dept.	of State:
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> 8TH ST 1317	<u>ADDRESS)</u>	
	MIAMI	33130	
	Registered Agents Inc		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	· ·
(b)	7901 4th St N	PE	
(b)			
(b)	NEW Registered Office Address:		
(b)	NEW Registered Office Address: STE 300		

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Robin Jones

 $\frac{R_{1}-h_{2}}{h_{1}-h_{2}} = \frac{1}{h_{1}-h_{2}} + \frac{1}{h_{1}-h_{$ Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts David Roberts - Assistant Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00