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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

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ter—the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:__

LLC REGISTERED AGENT CHANGE XT SCIENTIFIC, LLC

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M. SOLOMON

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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:		
2. (a)	7901 4th St N	(b) ^{7901 4th}	StN
(,	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. Peters	sburg, FL 33702
	05/13/24	L2400022	2845
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	PARIS, THOMSON		
J. 107	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of St	ate:
	416 GLENVIEW DRIVE		.2
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	_
			:
	TALLAHASSEE	32303	-
	, FL		- .
(b)	Northwest Registered Agent LLC		;
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	1
	7901 4th St N		
	NEW Registered Office Address:		_
	STE 300	••,	_
	St. Petersburg . FL	33702	
the cha agent v was/wa	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 ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered offi ability company, it of the limited liabil	ice and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in
	1. Something	Nat Smith	
	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obj to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I ld in writing of this change.	ee to act in this ca performance of m d for in Chapter 60 tereby confirm tha	pacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
1-4-	Taylor Newman - Assistant Se	ecretary	