Division of Corporations

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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.

2. (a) 411 Walnut Street # 22834 (b) 7901 4th ST N STE 300 Principal office address of limited liability company: (Nate: MLST BE STREET ADDRESS) Green Cove Springs FL 32043 Date of filing/registration in Florida 4. Document number 8EHSMAN, KRIS W, JR Registered Agent and Registered Office shown on the records of the Florida Dept. of State. 1671 SW 121H STREET Registered Agents Inc 1671 SW 121H STREET Registered Agents Inc Enter name of NEW Registered Agent analysis NEW Registered Office address: 7901 4th St N NEW Registered Office Address: STE 300 St. Petersburg St. Petersburg FL 33702 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that afte the change or changes are made, the Florida street address of the registered office and the business office of the regist agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the changes was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided the articles of organization or the operating agreement of the limited liability company or as otherwise provided the articles of organization or the operating agreement of the limited liability company or as otherwise provided in a member or authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in a member of all stratutes relative to the proper and complete performance of any duties, and I om familiar with and act the other accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all stratutes relative to the proper and complete performance of any duties, and I om familiar with and act the order of reflect a change in the registered office address. Hereby confirm that the limited liability company has been onlifed in writing of this change. Polity of this change.	1. N	ame of the limited liability company:	.L.C				
Principal office address of limited liability company: (Nate: MUST BESTREET ADDRESS) Green Cove Springs FL 32043 St. Petersburg FL 33702 05/21/24 L24000236295 3. Date of filling/registration in Florida 4. Document number 5. (a) BEHSMAN, KRIS W, JR Registered Agent and Registered Office shown on the records of the Florida Dept. of State. 1671 SW 12TH STREET Registered Office Address (MUST BE FLORIDA STREET ADDRESS) MIAMI FL 33135 (b) Registered Agents Inc Enter name of NEW Registered Agent analors NEW Registered Office address: 7901 4th St N NEW Registered Office Address: STE 300 St. Petersburg FL 33702 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that afte the change or changes are made, the Florida street address of the registered office and the business office of the regist agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Full William or of a member or authorized typesentative of a member. I hereby accept the appointment as registered agent as provided for in Chapter 605. F. Or, if the company has been obligations of my position as registered agent as provided for in Chapter 605. F. Or, if the company has been obligation within gol this change.	2. (a)	411 Walnut Street # 22834	(b)	(b) 7901 4th ST N STE 300			
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