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To:		
	Division of Corporations	
	Fax Number : (850)617-6383	
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From:		-
	Account Name : REGISTERED AGENTS INC.	_
	Account Number: I20090000081	
	Phone : (307)200-2803	
	Fax Number : (813)436-5206	
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	email address for this business entity to be used for future $\cdot\cdot\cdot$,	<u>ء</u>
annual	report mailings. Enter only one email address please.**	-
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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.

	ame of the limited liability company:			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9920 ESTERO OAKS DRIVE #304		9920 EST	ERO OAKS DRIVE #304
	FORT MYERS, FL 33967		FORT MY	YERS, FL 33967
	07/25/2024		L24000330	090
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	REGISTERED AGENTS INC			
	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of Stat	ie:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>ss)</u>	_
	7901 4TH ST N STE 300			-1 (2)
	ST. PETERSBURG F	L_33702		TITE TE
(b)	B Mark Kennedy			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office :	iddress:	= (
	9920 ESTERO OAKS DRIVE #304			
	NEW Registered Office Address:			,
	FORT MYERS	. 33967		-
hange igent v was/wi	FORT MYERS limited liability company is not organized under the lagor changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iws of the register in the contract of the limited	red office an company, it is mited liabilit liability con	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.
C 1 ·	iture of a member or authorized representative of a member	B :	Mark Kennedy	Printed or typed name of signce
l here. provisi he obl o mer	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	o nerfori	nance of my	acity. I further agree to comply with the duties, and I am familiar with and accent