L24 200	336 334
(Address)	300440564783
(City/State/Zip/Phone #)	FILED 2024 DEC -4 PH 4: 23 SECRETARY OF STATE TALLAHASSEE, FL
Office Use Only	2024 DEC -4 PH [2: 1] Rolling

and a second second

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.

(a)			(b)
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)
	540 BAY ISLES RD SUITE 2		3657 CORTEZ RD. W SUITE 110
	LONGBOAT KEY, FL 34228		BRADENTON, FL 34210
	07/30/2024		L24000336334
	Date of filing/registration in Florida	4.	Document number
	Registered Agent and Registered Office shown on the records NIPPERT, JASON Registered Office Address (MUST BE FLORIDA STREE		St 202
	3657 CORTEZ RD. W. SUITE 110 BRADENTON		AHASS
(b)	BRADENTON .	FL_34210	SSEE, FL
(b)	BRADENTON	FL_34210	SSEE, FL
(b)	BRADENTON	FL_34210	SSEE, FL
(b)	BRADENTON Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	FL_34210	SSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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.

/s/Alana Brown

Alana Brown

Signature of a member or authorized representative of a member

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.

Kubi 10 nac Signature of Registered Agent

Grace E. Kirby, Asst Vice President

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