Page: 2 of 3 2023-08-30 12.32 43 CST 12122023573 From: David Tho

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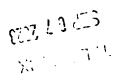
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To .

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.

	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 301 S. Signal Butte Rd (Office)		(b)				
- A	(Note: MUST BE STREET ADDRESS)	···					
	301 S. Signal Butte Rd (Office)			Mailing address (Note: MAY	of limited fiab	ility com	pany:
0			301 S. Signal Butte Rd (Office)				
_	Apache Junction, AZ 85120	_	Apache Ju	inction, AZ 85120			
:	02/15/1999		L99000000	860			
<i>,</i> .	Date of filing/registration in Florida	4.	***************************************	Document n	umber		
5. (a) V	VICTOR TROIANO						
	egistered Agent and Registered Office shown on the records of t	the Florio	da Dept. of Stat	- e;			
	Registered Office Address <u>(MUST BE FLORIDA STREET A</u> 317 S TENNESSEE AVE	DDRES	S)				
L	LAKELAND	33801					
(b)	T Corporation System				 -		
En	nter name of NEW Registered Agent and/or NEW Registered	Office n	ddress:			كائماً دُر،	
N	EW Registered Office Address:	~				1	
13	200 South Pine Island Road						•
_				,	-	<u> </u>	(_*
P	Plantation	33324			-, • -	1	
_				•	<u>-</u> .	ب ي	
gent will as/were	ited liability company is not organized under the law e or changes are made, the Florida street address of l be identical. Or, in the case of a Florida limited lia authorized by an affirmative vote of the members of es of organization or the operating agreement of the	the reg sbility of f the lin limited	istered office company, it is nited liability liability con	and the busi s hereby conf y company or pany.	ness office	of the n	gistere
Signatur	of a member of arthorized representative of a member	lliam Comgar					
-				Printed or type			
ne obliga merely otified in	accept the appointment as registered agent and agris of all statutes relative to the proper and complete ations of my position as registered agent as provided reflect a change in the registered office address. In writing of this change. C T Corporation System	l for in ereby	Chapter 60: Confirm that	inites, and 1 is 5, F.S. Or, if i the limited lic	am jamular this docume sbility comp	comply with an ont is bei any has	with the d accep ing filed been
J -	of Registered Agent	Mail	у тоон, Аѕ	ist. Secreta	ıı y		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25,00