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(Requestor's Name)					
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(City/State/Zip/Phone #)					
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A. RAMSEY FEB 21. 2024 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	12000000019	9 5					
REFERENCE	:	312765	7482226					
AUTHORIZATION	:							
COST LIMIT	:	\$ 35:00	Pa					
ORDER DATE : February 9, 2024			2 Kills					
ORDER TIME : 11:03 AM								
ORDER NO. : 312765-123								
CUSTOMER NO: 7482226								
CHANGE OF AGENT								
NAME: SULPHUR ASSETS HOLDING COMPANY, LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Shauna Godbol	t							
FX	ודאב	JER'S TNITTA	.T.S •					

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. N	ame of the limited liability company:SULPHUR /	ASSETS HOL	DING COMPANY, LLC			
2. (a)	101 East Kennedy Boulevard, Suite 2500	(b)	3033 Campus Drive, Suite	pus Drive, Suite W400		
2. (H)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of lim	ited liability company: OST OFFICE BOX)		
	Tampa, FL 33602		Plymouth, MN 55441-2651			
	07/02/2002	٨	102000001743			
3.	Date of filing/registration in Florida	 4	Document numbe	<u> </u>		
5. (a)	C T Corporation System					
5. (a)	Registered Agent and Registered Office shown on the records	s of the Florida I	Dept. of State:			
	1200 South Pine Island Road					
	Registered Office Address (MUST BE FLORIDA STREE		20			
				- -		
	Plantation	FL_33324		2024 FEB 2		
	,	. F.D				
(b)				書		
(*)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Office addi	ess:	- · · · · · · · · · · · · · · · · · · ·		
	Corporation Service Company			## =		
	NEW Registered Office Address:	······································				
	1201 Hays Street					
	Tallahassee	FL_32301				
			 			
f the li	mited liability company is not organized under the or changes are made, the Florida street address of t	laws of the Si	ate of Florida, it is hereby co	onfirmed that after the		
gent w	vill be identical. Or, in the case of a Florida limited	l liability com	pany, it is hereby confirmed	that the change(s)		
vas/we	re authorized by an affirmative vote of the member class of organization or the operating agreement of the	rs of the limite he limited lial	ed liability company or as of	herwise provided in		
ne arm	X el 2 COMI		mi, Authorized Person			
Signat	ure of a member or authorized representative of a member	-	Printed or typed name	of signee		
	y accept the appointment as registered agent and a ons of all statutes relative to the proper and comple gations of my position as registered agent as provid ly reflect a change in the registered office address, in writing of this change.	ete performan ded for in Ch I hereby conj	ce of my duties, and I am fan apter 605, F.S. Or, if this do irm that the limited liability	ee to comply with the niliar with and accept connent is being filed company has been		
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Signatur	e of Registered Agent	Ami M. C	Casper, Asst. Vice Presid	dent		