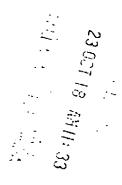
## MOODOOMI

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filling Officer:					
Special instructions to 7 ming officer.					
J. HORNE					
OCT 19 2023					
00113 2023					

Office Use Only



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RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 061913 4342287
AUTHORIZATION: (Special man)
COST LIMIT : \$ 25.00
ORDER DATE: October 11, 2023
ORDER TIME : 2:46 PM
ORDER NO. : 061913-173
CUSTOMER NO: 4342287
CHANGE OF AGENT
NAME: THE GOODMAN GROUP, LLC
Wild Cooperat Groot, and
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland-sorenson
EXAMINER'S INITIALS:

## 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	lame of the limited liability company:THE GOODM	IAN GROU	P, LLC		
2. (a)	1107 HAZELTINE BOULEVARD SUITE 200	(t	(b) 1107 HAZELTINE BOULEVARD SUITE 200		
(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(3		failing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	CHASKA, MN 55318		CHASKA,	MN 55318	
	11/20/2006		M06000006	6471	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	)				
	) Registered Agent and Registered Office shown on the records NRAI SERVICES, INC	of the Florida	Dept. of State		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1200 South Pine Island Road				
	Plantation	33324		1-1	
(b)	Enter name of NEW Registered Agent and/or NEW Register  Corporation Service Company	dress:	3CC7 18 Mill: 32		
	NEW Registered Office Address:			4	
	1201 Hays Street			$\sim$	
	Tallahassee I	FL_32301			
chang agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	he registere liability co s of the lim	d office and mpany, it is ited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	/s/ Jill Cilmi Jill Cilmi, Autho				
	ature of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to mer	thy accept the appointment as registered agent and a cions of all statutes relative to the proper and complet digations of my position as registered agent as provid rely reflect a change in the registered office address, ad in writing of this change.	gree to act te performa ted for in C I hereby co	in this capa ince of my d hapter 605, infirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been	
X)M Signati	ace t-Kuby ure of Registered Agent	Grace E. K	irby, Asst. V	Vice President	