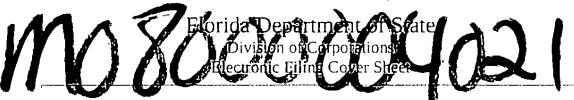
Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE SMART WAREHOUSING, LLC

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12/21/2023 12:31:29 PST To: 18506176383 Page: 2/2 From: Registered Agents Inc Fax: 8134365206

## 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.

l. Na	ume of the limited liability company: Smart Warehousin	g, LLC		
2. (a)		(b	o)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	09/02/2008	_	M08000004	021
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	BARBARI, MARK			
2. (a)	Registered Agent and Registered Office shown on the records of the			
	Registered Office Address	DDRESS	<u>5)</u>	-
	3131 CARUSO COURT			_
	ORLANDO .FL	32856		
(b)	Northwest Registered Agent LLC  Enter name of NEW Registered Agent and/or NEW Registered (	Office ad	dress:	-
	7901 4th St N			- - - : :2
	NEW Registered Office Address:			<u>-</u>
	STE 300			ر. س
	St. Petersburg	33702		_
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regi ibility co f the lin	stered offic ompany, it i nited liabilit	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
ĹΖ	ture of a member of authorized representative of a member	Nat	Smith ————	
				Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change.	ee to ac perform l for in ( nereby c	t in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
- / l/-	Taylor Newman - Assistant Se	cretary		
Signatu	re of Registered Agent			