M100000003511

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
<u> </u>				





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2024 DEC 18 AH 11: 13

2024 DEC 18 PH 1:23 SECRETARY OF STATE TALLAHASSEF, FL

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 812802 8468038

AUTHORIZATION : C

COST LIMIT : \$ 25.00

ORDER DATE: December 5, 2024

ORDER TIME : 9:53 AM

ORDER NO. : 812802-027

CUSTOMER NO: 8468038

CHANGE OF AGENT

NAME: ECOAIRE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

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.

I. Na	ame of the limited liability company:	С		
2. (a)	4157 Seaboard Road	(b)		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(%)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Orlando, FL 32808	<u> </u>		
	08/09/2010	M1	10000003511	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	United Agent Group Inc.			
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	801 US Highway 1			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	North Palm Beach	FL_33408		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street		DZ-LI	
	Tallahassee	32301 FL	2024 DEC 18 SECRETARIA TALLAHA	
change agent v was/w	imited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the control of the control	he registered or liability comparts of the limited	ate of Florida, it is hereby confirmed that after the office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in	
/s/	John C. Lavorato	John C.	C. Lavorato, Authorized Person	
	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obi to mer	by accept the appointment as registered agent and a ions of all statules relative to the proper and comple ligations of my position as registered agent as provic ely reflect a change in the registered office address, d in writing of this change. []	le performance ded for in Cha _l I hereby confir	this capacity. I further agree to comply with the ce of my duties, and I am Jamiliar with and accepapter 605, F.S. Or, if this document is being filed firm that the limited liability company has been Service Company	
		•	per, Asst. Vice President	
Signatu	ire of Registered Agent	•	-	