## M12000004084

| (Requestor's Name)                      |
|---|
| (Address)                               |
| · ,                                     |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (City/State/Zip/Prione #)               |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Document Number)                       |
| ·                                       |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer  |
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|   |

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

|                   | ACCOUNT NO.    | :    | I2000000   | 195     |
|-------------------|----------------|------|------------|---------|
|                   | REFERENCE      | :    | 746674     | 7872917 |
| i                 | AUTHORIZATION  | : (  | miles      | enen    |
|                   | COST LIMIT     | :    | \$ 25.00   |         |
| ORDER DATE : Ma   |                |      |            |         |
| ORDER TIME : 8    | •              |      |            |         |
| ORDER NO. : 746   |                |      |            |         |
| CUSTOMER NO:      |                |      |            |         |
|                   |                |      | . <b></b>  |         |
|                   | CHANGE OF AC   | GENT | <u>r</u>   |         |
|                   |                |      |            |         |
| NAME.             | SUNRISE DETOX  | TT   | r i.i.c    |         |
| wani.             | DOMNING DETON  | 111  | c, iiiC    |         |
|                   |                |      |            |         |
| PLEASE RETURN THE | FOLLOWING AS   | PRO  | OOF OF FIL | ING:    |
| CERTIFIE          | ) COPY         |      |            |         |
| XX PLAIN STA      | MPED COPY      |      |            |         |
|                   |                |      |            |         |
| CONTACT PERSON:   | Alexxis Weilar | nd-s | 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                                  | ame of the limited liability company:  | III, LLC                                     | ;                              |   |   |  |  |
|---------------------------------------|--|--|--------------------------------|---|---|--|--|
| 2. (a)                                | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   | من   | (b)                            | Go  | Mailing address of  |  | mpany:   |
|                                       | 2328 10th Avenue Suite 300-301   |  |                                | 2328 10                                     | Oth Avenue Suite  |  |  |
|                                       | Lake Worth Beach, FL 33461   |  | -                              | Lake W                                      | orth Beach, FL 3  | 3461   |  |
|                                       | 05/21/2010   |  | ٨                              | /12000                                      | 004084  |  |  |
| 3.                                    | Date of filing/registration in Florida   | 4.   | -                              |   | Document num  | ıber   |  |
| 5. (a)                                | Nathan Nason   |  |                                |   |   |  |  |
| J. (a,                                | Registered Agent and Registered Office shown on the records o  | f the Flor                                   | rida D                         | ept. of St                                  | ate: -  | _  |  |
|                                       | Nason Yeager, et al.   |  |                                |   |   | 2023   |  |
|                                       | Registered Office Address (MUST BE FLORIDA STREET  | ADDRE  | :SS)                           |   |   |  | * :  |
|                                       | 3001 PGA Blvd. #305  |  |                                |   |   |  | And the second                                 |
|                                       | Palm Beach Gardens . F   | L 3341                                       | 0                              |   | _   | ANY OF STATI   | M  |
| (b)<br>-                              | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company   | ed Office                                    | <u>addr</u>                    | <u>ess</u> ;                                | _   | TATE   | స్త<br>మ                                       |
|                                       | NEW Registered Office Address:   |  |                                |   | _   |  |  |
|                                       | 1201 Hays Street   |  |                                |   | _   |  |  |
|                                       | Tallahassee, F   | L_3230                                       | 1                              |   |   |  |  |
| chang<br>agent<br>was/w<br>the art    | limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members licles of organization or the operating agreement of the latered of a member or authorized representative of a member | e regist<br>iability<br>of the l<br>e limite | ered<br>com<br>imite<br>d lia  | office a<br>pany, it<br>ed liabil           | and the business of is hereby confirming or a company or a company.                   | office of the regi<br>ned that the cha<br>s otherwise pro-                 | stered<br>nge(s)                               |
| provis<br>the ob<br>to mer<br>notifie | thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is change, when you have a with a writing of this change, and so, and so, are of Registered Agent                    | ree to c<br>perfor<br>ed for in<br>hereby    | act in<br>man<br>n Cha<br>conj | this ca<br>ce of my<br>apter 60<br>firm tha | pacity. I further<br>y duties, and I am<br>)5, F.S. Or. if thi<br>t the limited liabi | agree to comply<br>a familiar with a<br>s document is b<br>lity company ha | with the<br>md accept<br>eing filed<br>as been |