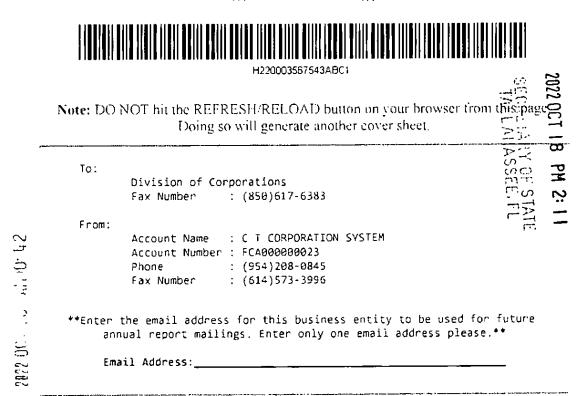
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Division of Corporations

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003567543)))



LLC REGISTERED AGENT CHANGE APEO, LLC

C. BRUMBLEY

OCT 19 2022

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	nme of the limited liability company: APEO, LLC		
2. (a)	No Change	(b) No Change	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)
	09/17/2014	M14000	0006697
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the records of	the Florida Dept, of	State.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET		FIL 2022 OCT 18 SECRE SAR
	TALLAHASSEE, FL	32301-2525	CT 18 P
(b)	C.T. Corporation System		TIB PH 2: I
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		FAIE -
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation, FL	33324	
the cha agent v was/w	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lierc authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registered o ability company of the limited lia : limited liability	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
	iture of a member or authorized representative of a member	JOE DAVIS	, MANAGER
		marker and in this	Printed or typed name of signee
provis the obt to mer	by accept the appointment as registered agent and ag 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, I d in writing of this change.	ree to act in this eperformance of ed for in Chapter hereby confirm i	eapacity. I further ugree to comply with the first duties, and I am jamiliar with and accept of 605, F.S. Or, if this document is being filed that the limited liability company has been
By:	77934	chele Holden,	
Signati	ire of Registered Agent As	sistant Secretary	

To: