| M16000                                       | 209107                            |
|--|-----------------------------------|
| (Requestor's Name)<br>(Address)<br>(Address) | 100390252251                      |
| (City/State/Zip/Phone #)                     | SECRETAL AVAILATED<br>TALLAVAILED |
| Special Instructions to Filing Officer:      | RECEIVED                          |
| Office Use Only                              | A. BUTLER                         |
|  | JUN 1 2 2022                      |

## \* 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,

|   |   | (b)   |   |  |
|---|---|---|---|--|
| Principal office address of limited liability company:<br>( <u>Note: MUST BE STREET ADDRESS</u> ) |   | (b)   |   |  |
| 19C TROLLEY SQUARE  |   | 19C TROLI   | LEY SQUARE  |  |
| WILMINGTON, DE 19806  |   | WILMINGTON, DE 19806  |   |  |
| 11/14/2016  |   | M160000091  | 07  |  |
| Date of filing/registration in Florida  | 4.  |   | Document number   |  |
|   |   |   |   |  |
| Registered Agent and Registered Office shown on the records on NORTHWEST REGISTERED AGENT LLC.    | of the Flor   | ida Dept, of State  | :   |  |
| Registered Office Address (MUST BE FLORIDA STREE  | <u>ľ addre</u>  | <u>'SS)</u>   |   |  |
| 7901 4TH STREET N. SUITE 300  |   |   |   |  |
| ST.PETERSBURG   | -1. <u>33702</u>  |   | 2022<br>SECR  |  |
|   |   |   |   |  |
| Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>                              | ed Office   | address:  |   |  |
| Incorporating Services, Ltd.  |   |   | ELED<br>2022 JUL II PM 1: 09<br>SECRETANY OF STATE<br>TALLAHASSEE, PI   |  |
| NEW Registered Office Address:  |   |   | 909 E   |  |
| 1540 Glenway Drive  |   |   |   |  |
| Tallahassee, F  | 32301   |   |   |  |
|   | ( <u>Note: MUST BE STREET ADDRESS</u> )<br>19C TROLLEY SQUARE<br>WILMINGTON, DE 19806<br>11/14/2016<br>Date of filing/registration in Florida<br>Registered Agent and Registered Office shown on the records of<br>NORTHWEST REGISTERED AGENT LLC.<br>Registered Office Address <u>(MUST BE FLORIDA STREET</u><br>7901 4TH STREET N. SUITE 300<br>ST.PETERSBURG | (Note: MUST BE STREET ADDRESS)  19C TROLLEY SQUARE  WILMINGTON, DE 19806  11/14/2016  Date of filing/registration in Florida 4.  Registered Agent and Registered Office shown on the records of the Flor NORTHWEST REGISTERED AGENT LLC.  Registered Office Address (MUST BE FLORIDA STREET ADDRE 7901 4TH STREET N, SUITE 300  ST.PETERSBURG . FL 33702  Enter name of NEW Registered Agent and/or NEW Registered Office Incorporating Services, Ltd.  NEW Registered Office Address: 1540 Glenway Drive | (Note: MUST BE STREET ADDRESS)         19C TROLLEY SQUARE       19C TROL         WILMINGTON, DE 19806       WILMINGTON, DE 19806         U1/14/2016       M160000091         Date of filing/registration in Florida       4.         Registered Agent and Registered Office shown on the records of the Florida Dept, of State         NORTHWEST REGISTERED AGENT LLC.         Registered Office Address         (MUST BE FLORIDA STREET ADDRESS)         7901 4TH STREET N, SUITE 300         ST.PETERSBURG       .FL.         ST.PETERSBURG       .FL.         Enter name of NEW Registered Agent and/or NEW Registered Office address:         Incorporating Services, Ltd.         NEW Registered Office Address: |  |

Signature of a member or authorized representative of a member

. . .

NEGOITA BRUNO - Owner/Representative

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Steh 1. August

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00