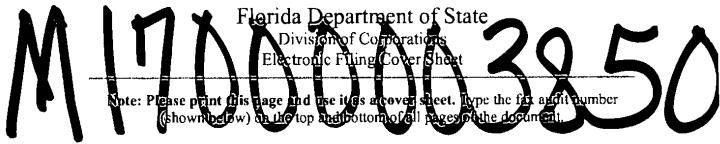
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From: Ranae I

4/2/2021

Division of Corporations



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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 : (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

17	Address:			
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LLC REGISTERED AGENT CHANGE THE SY-KLONE COMPANY, LLC

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APR - 5 2021

M. SOLONON

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Help

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.

(a) دځ		(o)	Mailing address of limited liability company:	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	4390 IMESON ROAD		JACKSONVILLE, FL 32219		
	JACKSONVILLE, FL 32219				
	05/04/2017		M170000	03850	
	Date of filing/registration in Florida	4.		Document number	
. (a)	HOULD, STEPHEN A				
. (4)	Registered Agent and Registered Office shown on the records of	of the Florid	в Dept. of Si	tate:	
	Registered Office Address (MUST BE FLORIDA STREET				
	4390 IMESON ROAD	2			
	JACKSONVILLE , F	32219		2021 A	
		<u> </u>		- · APR	
(b)	C T Corporation System			12 R	
(-)	Enter name of NEW Registered Agent and/or NEW Registers	ed Office au	dress:		
				: `` ⊐ ¥	
		<u>.</u>			
	NEW Registered Office Address:			<u> </u>	
	1 200 South Pine Island Road			and the	
	Plantation, F	1, ³³³²⁴			
		·			
			~	Storida, it is becake confirmed that after	
the l	imited liability company is not organized under the l	aws of the	State of i	t tortua, it is necessity continued that after	
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