9/11/2019

## Flockda Departurient of State Division of Corporations Effectionic Filing Coversheet

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Division of Corpor	ations		
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Account Name :	REGISTERED AGENTS INC.		
Account Number	: 120090000081		;
Phone : (307	1200-2803		· · · · · · · · · · · · · · · · · · ·
Fax Number : (855)330-1010			
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Corporate Filing Menu

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

Na	ame of the limited liability company: Lohxa		
(a)	600 MAIN ST, STE. 110	(b) (	600 MAIN ST, STE. 110
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	WORCESTER, MA 01608		VORCESTER, MA 01608
	11/15/2017	М	17000009744
	Date of filing/registration in Florida	4.	Document number
(a)	COUNCIL, JAMES		
\**/	Registered Agent and Registered Office shown on the record	s of the Florida De	epi, of State:
	4525 GENTRICE DR.		7. 70
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	SEP TI
	VALRICO	FL 33596	SEP 11 N
(b)	Northwest Registered Agen	t LLC	
(,	Enter name of NEW Registered Agent and/or NEW Registered	ered Office addre	55. 5
	7004 AND CA N		
	7901 4th St N		
	7901 4th St N  NEW Registered Office Address:		- <del></del>

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Margar Out.	Morgan Noble	
Signature of a member or authorized representative of a member	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 the change.

Signature of Registered Agent