(Requestor's Name)					
(Address)					
sbbA)					
(City/	State/Zip/Phor	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	ness Entity Na	ime)			
(Dan)	ument Number				
(Doci	ument Number)			
Certified Copies	Certificate	es of Status			
Special Instructions to Fi	ling Officer				
		RNE 2 2023			

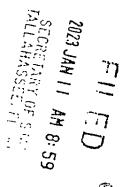
Office Use Only



700398924387

2023 JAN I I PH 4: 07 SLORI LARY OF STATE TALLAHASSEE, FLORIDA

RECEIVED







115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:(01/11/2023	
Name:		
Reference #:	4004554	_
Entity Name:		ANEW RNG, LLC
☐ Amend ☐ Chang ☐ Reinst ☐ Conve ☐ Merge ☐ Dissolu ☐ Fictitio	dment e of Agent atement rsion r ution/Withdrawal us Name	orization to Transact Business
Authorized Ar Signature:	mount: \$25	

F: 800.944.6607



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838

F: 866.625.0839

COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/11/2023	
	Chris Vick	
	1861551	
	AN	EW RNG, LLC
Article	es of Incorporation/Authorizat	on to Transact Business
Amer Amer	ndment	
🚺 Chan	ge of Agent	
Reins	statement	
☐ Conv	ersion	
☐ Merg	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ious Name	
☐ Othe	r	
Authorized /	Amount: # \$25.00	

F: +852.2682.9790

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.

l. Na	nine of the limited liability company: ANEW R	ING, LLC	
2. (a)	Principal office address of limited hability company:	(b)	Mailing address of limited liability company:
	(<u>Note: MUST BE STREET ADDRESS</u>)		(Note: MAY BE POST OFFICE BOX)
	No Change	No.	Change
	August 14, 2018		M18000007509
3.	Date of filing/registration in Florida	4.	Document number 😤 😞 💍
5. (a)	Corporation Service Company		SECRETARY ALLANSSEE
	Registered Agent and Registered Office shown on the record	ls of the Florida Dept	of State:
	1201 Hays Street		587
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	Tallahassee	, FL_32301-252	25 8: 59
(b)	COGENCY GLOBAL INC.		9
	Enter name of NEW Registered Agent and/or NEW Register	ered Office address:	
	115 North Calhoun St., Suite 4		
	NEW Registered Office Address:		
	Tallahassee	, _{FL} 32301	
the cha agent vas/w the art Signa	imited liability company is not organized under the inge or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of a member or authorized representative of a member by accept the appointment as registered agent and tions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address	s of the registered liability compaets of the limited liabil Keri Be	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Evel Printed or typed name of signee. It is canacity. I further coree to comply with the

/s/ Michael Carlisle

Signature of Registered Agent