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,то:	Division of Corporations Fax Number : (850)617-6383			
From	Account Name : CORPORATE CREATIONS INTERN Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442	ATIONAL INC.		2
	er the email address for this business entity t annual report mailings. Enter only one email ad Bmail Address:	o be used for ddress please.	future :	- : 1_ [_ 2021 HAR 16 A
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the	limited liability company is:	N3, LLC	· · · · · · · · · · · · · · · · · · ·			
2. (a) Principal office address of the limited liability company:		mpany:	3565 Piedmont Road NE Building 3 Ste 650			
<u>(Note: MI</u>	JST BE STREET ADDRESS)		Atlanta GA 30305			
(b) Mailing address of limited liability company:			3565 Piedmont Road NE Building 3 Ste 650			
(Note: MAY BE POST OFFICE BO)			Atlanta GA 30305		<u></u>	
	9/18/2018		M18000008560			
3. Date of filing/registration in Florida			4. Document number			
5.(a) Registered	Agent and Registered Office	shown oi	the records of the Florida Dept.	of State:		
Registered A	l Sgent:		INCORP SERVICES, INC		200	
Registered (Dffice Address:		17888_67TH_COURT_NORTH		RAN XA	
			LOXAHATCHEE FL 33470		<u>_</u>	
(b) Enter name	of <u>NEW Registered Agent</u> and/or	NEW Re	gistered Office address:		Añ IO:	
NEW Rey	gistered Agent:		Corporate Creations Network Inc.	<u> </u>		
NEW Reg	istered Office Address:		801 US Highway 1	ār.	ۍ 	
(MUST BI	EFLORIDA STREET ADDRE	<u>SS)</u>				
	1		North Palm Beach EL 33	408		

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after 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.

(Signature of a member or authorized representative of a member)

Courtney Nanke, Attorney-in-Fact (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.

(Signature of Register	d Agent) Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
INHS18(10/99)	
Corporate Creation	ns International
801 US Highway 1 North Palm Beach (561) 694-8107	FL 33408