1/15/25, 9:21 AM

Division of Corporations



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JAN 1 6 2025 K. Brumble To:

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.

I. Na	ime of the limited liability company: Geoffolday Dev	elopmer	it, LLC		
2. (a)	235 E WARM SPRINGS ROAD	(b) PO BOX 231300			
` , ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 -		Mailing address of timited hability company: (Note: MAY BE POST OFFICE BOX)	
	SUITE 107		LAS VEG	AS, NV 89105	
	LAS VEGAS, NV 89119	_			
	12/26/2018		M19000000	312	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Northwest Registered Agent LLC				
J. (u,	Registered Agent and Registered Office shown on the records of 7901 4TH ST N	the Flori	da Dept. of State	- Y:	
	Registered Office Address (MUST BE FLORIDA STREET STE 300	ADDRE:	<u>ssy</u>	•	
	ST. PETERSBURG , FI	33702		20	
(b) _	C T Corporation System			125 J	
	Enter name of NEW Registered Agent and/or NEW Registered	l Office a	ddress:	APPROVED FILED PH	
	NEW Registered Office Address:				
	1200 South Pine Island Road			्रें अ	
	Plantation , FI	33324			
the char agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members called of organization or the operating agreement of the	f the reginability of the linited	istered office company, it is mited liability l liability com	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
Signati	/s/CHRISTOPHER JONES, MANAGER ure of a member or authorized representative of a member			Printed or typed name of signee	
provisio the obli to mere notified By:	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change. CT Corporation System SEAN L. EMERICK, ASSISTANT SECRETARY TO OF Registered Agent	ree to a performed for in hereby	ct in this cape nance of my c Chapter 605 confirm that t	with I firsther garge to comply with the	

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