M19000002225

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 341033 8253472							
AUTHORIZATION :							
COST LIMIT : \$ 25.00							
ORDER DATE : February 29, 2024							
ORDER TIME : 11:41 AM							
ORDER NO. : 341033-017							
CUSTOMER NO: 8253472							
CHANGE OF AGENT							
NAME: MILSUB LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Shauna Godbolt							

EXAMINER'S INITIALS:

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.

1. Na	ame of the limited liability company: MILSUB LLC						
		(h	1)				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("		1ailing address of l (Note: MAY BE	limited liab	oility co	mpany:
	2336 SE Ocean Blvd 400		2336 SE C	Ocean Blvd 400			
	Stuart, FL 34996	_	Stuart, FL	34996			
	02/25/2019		M19000002	2225			
3.	Date of filing/registration in Florida	4.	[Document num	ber		
5. (a)							
J. (u)	Registered Agent and Registered Office shown on the records of the SUBIN, NEIL S	he Florida	Dept. of State	:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2				
	2336 SE Ocean Blvd 400				 !	~ >	
	Stuart FL_	34996			SLUE ALLAI	2024 MAR -4	7- 1
					HAS	₹.	1 :
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		ALLAHASSEE, FLORID!		iT1
	Corporation Service Company				LORI	AM 9: 48	
	NEW Registered Office Address:) - -	ထ	
	1201 Hays Street						
	Tallahassee FL_	32301					
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registere bility co f the lim	ed office and mpany, it is ited liability	the business of hereby confirm company or as	ffice of the	he reg he cha	istered inge(s)
/S/ Anthony Lanza			Anthony Lanza, Authorized Person				
Signa	ture of a member or authorized representative of a member			Printed or typed n	ame of sig	nee	
provisi the obl to mer notified	by accept the appointment as registered agent and agreions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to act performa for in C ereby co	in this capa ince of my d Thapter 605, infirm that th	city. I further o uties, and I am F.S. Or, if this he limited liabil	agree to c familiar s docume lity comp	comply with a ent is b eany he	wwith the and accept eing filed as been

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President