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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.

(a)		(b)	
	Principal office address of limited hability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
	05/28/2019		900005227
	Date of filing/registration in Florida	4.	Document number
(a)	Corporation Service Company		
	Registered Agent and Registered Office shown on the records of	t the Florida Dep	
	1201 Hays Street		12024
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESSj	FEB 19 PH
			B B F
			PALLAHASSET, FLORID
	Tallahassee	[_ 32301	
. 1	Devictored Areata los		
(0)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and or <u>NEW Registered</u>	d Office addres	TALLAHASSEE FLORID
	7901 4th St N NEW Registered Office Address:		
	STE 300		
	St. Petersburg Fi	1, 33702	
he I	imited liability company is not organized under the la	iws of the Sta	te of Florida, it is hereby confirmed that after
cha nt v s/wi	inge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registere iability comp of the limited	ed office and the business office of the register any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
,		Robin Jo	nes
igna	ture of a member or authorized representative of a member		Printed or typed name of signce

Thereby accept the appointment as registered agent and agree to det in this capacity. Thereby accept the appointment as registered agent and agree to det in this capacity, in the argent is marked 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. Thereby confirm that the limited liability company has been notified in writing of this change.

Signatule of Registered Agen:

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00