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(((H22000245642 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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LLC REGISTERED AGENT CHANGE PRIDENOW LLC

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COVER LETTER

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e of Limited Liability Company
ce Change and fee(s) are submitted for filing.
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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

I. Na	me of the limited liability company: PRIDENO	W LL	_C		
	420 LEXINGTON AVEFL 30	ſ	_{b)} 420 LEX	KINGTON AVI	EFL 30
 (a)	Principal office address of limited liability company:	\	Mailing address of limited habitity company. (Note: MAY BE POST OFFICE BOX)		
	NEW YORK, NY 10170	_	NEW.	YORK, NY	
		_			
	6/24/2019		M19000	0006160	
3.	Date of filing/registration in Florida	4.	1	Document number	
5. (a)	BLUMBERGEXCEKSUIR CORPORATE SE	RVICE	ES, INC.		
(!!)	Registered Agent and Registered Office shown on the records of the 155 OFFICE PLAZA DRIVE 1ST FLO		ia Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET)	DDRES	35)		<i>C</i> 3
	TALLAHASSEE FL	323	01		F
(b)	Registered Agent Solutions, Inc.				20
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ldress:		75 (J) (
	155 Office Plaza Dr.				AH 11: 08
	NEW Registered Office Address:				C
	Suite A				
	Tallahassee FL	3230)1		
the cha agent w was/we	Tallahassee FL. imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	s of the the reg bility c	e State of Flor istered office ompany, it is nited liability	and the business of hereby confirmed t company or as other	fice of the register hat the change(s)

/s/	Leo Russell	Leo Russell	Member	
	Sanatura of a marsh or or sutharized more, entative of a member	Printed	or typed name of signer	

Signature of a member or authorized representative of a member

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.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent