## M9000007007

	(Requestor's Name)
<del></del>	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	;
<del></del>	<del></del>





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A. BUTLER OCT - 5 2022 CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : I2000000195							
REFERENCE : 969176 8356151							
AUTHORIZATION : STREET CONT.							
,							
ORDER DATE : September 22, 2022							
ORDER TIME : 1:40 PM							
ORDER NO. : 969176-075							
CUSTOMER NO: 8356151							
<u>CHANGE OF AGENT</u>							
NAME: IAS SERVICES GROUP, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY  XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker							

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. N	ame of the limited liability company:	S GROUF	, LLC				
2. (a)	1020 NE LOOP 410 SUITE 805	(b) 1020 NE LOOP 410 SUITE 805					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	SAN ANTONIO, TX 78209		SAN AN	TONIO, TX 7820	9		
		<u>.</u>					
	07/19/2019		M1900000	)7007			
3.	Date of filing/registration in Florida	4.	·	Document numb	er		
5. (a)	r						
	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State	<del>-</del> e:			
	PARACORP INCORPORATED						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u> </u>	_			
	155 OFFICE PLAZA DRIVE, 1ST FLOOR						
	TALLAHASSEE F	32301		_			
					ωo.	2[	
(b)	Para ANDREO CALLES	<del></del>		_	걸벌	)22 (	21.8197
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office ad	dress:		三曲	)CT	1 H
	Corporation Service Company			_		+-	Grand Te man
	NEW Registered Office Address:				실육	AM	
	1201 Hays Street				T'S	9: 06	
				-		90	
	Tallahassee	L_32301		_	1.,		
If the i	imited liability company is not organized under the la	we of the	State of Flo	rida it ia barabu	4"	مانداده	
agent v	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registere ability co of the lim	d office and mpany, it is ited liability	the business off hereby confirme company or as o	ice of the	ne regi he cha	stered nge(s)
	Jill Cilmi		•	rized Person			
Signa	ture of a member or authorized representative of a member	<del></del>	Printed or typed name of signee				
the obl to mere	by accept the appointment as registered agent and ago ons of all statutes relative to the proper and complete igations of my position as registered agent as provide tly reflect a change in the registered office address, I I in writing of this change.	ree to act performa d for in C hereby co	in this capa nce of my d hapter 605, nfirm that ti	wity. I further as luties, and I am fo F.S. Or, if this of the limited liabilit	gree to c amiliar docume y comp	comply with a nt is be any ha	with the nd accept eing filed is been
Signatu	nace C-Kubl re of Registered Agent	Grace	E. Kirby, z	Asst. Vice Presid	ent		