Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000147933 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number : (855)330-1010

**Enter the email address for this business entity to be used for future

ည်း**E**mail Address:

LLC REGISTERED AGENT CHANGE **HUNTERS NM LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. LEMIEUX

APR 2 1 2023

Electronic Filing Menu

Corporate Filing Menu

Help

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 liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	04/29/20		M20	000004111
	Date of filing/registration in Florida	4.		Document number
(a)	KENNELLY, SCOTT J. Registered Agent and Registered Office shown on the records of	f the Flor	ida Dept. of S	State.
	Registered Office Address (MUST BE FLORIDA STREET		<u>(SS)</u>	_
	1301 RIVERPLACE BOULEVARD, SUITE	1500		
(b)	1301 RIVERPLACE BOULEVARD, SUITE JACKSONVILLE . F Registered Agents Inc	1500 i. 322	207	2023 H : 5
(b)	1301 RIVERPLACE BOULEVARD, SUITE JACKSONVILLE	1500 i. 322	207	2023 H 10 20 AM
(b)	1301 RIVERPLACE BOULEVARD, SUITE JACKSONVILLE F Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered	1500 i. 322	207	20
(b)	1301 RIVERPLACE BOULEVARD, SUITE JACKSONVILLE Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N	1500 i. 322	207	N)

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

ROBIN JONES
Signature of a member or authorized fepresentative 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 natified in writing of this change.

David Roberts - Assistant Secretary