

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.

(((H25000040964 3)))



H250000409643ABC/

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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:	
----------------	--

## LLC REGISTERED AGENT CHANGE SITE INDUSTRIES, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing MSIMLY

Help

FEB - 4 2025

## 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.

2. (a)	7901 4th St NSTE 300St, Petersburg, FL 33702	(b) 79	201 4th St NSTE 300St. Petersburg, FL 33702
( )	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Nate: MAY RE POST OFFICE BOX)
	09/23/2020	<del></del>	2000008345
•	Date of filing/registration in Florida	4,	Document number
5. (н)	Registered Agent and Registered Office shown on the records of NORTHWEST REGISTERED AGENT LLC	of the Florida Dep	
	Registered Office Address (MUST BE FLORIDA STREE) 7901 4th St NSTE 300St.,	T ADDRESS)	63
	Petersburg , ,	33702	2025 TEB
	` '	·	TEB T
(b)	Enter name of NEW Registered Agent and/or NEW Register		
	C T Corporation System		్లే ఆ '
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation, F	°L <sup>33324</sup>	
he cha igent v vas/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the Sta of the registere liability comp s of the limited	te of Florida, it is hereby confirmed that after ed office and the business office of the registerer any, it is hereby confirmed that the change(s) Hisbility company or as otherwise provided in lity company.
Signa	ture of a member or authorized representative of a member	<del> </del>	Printed or typed name of signee
l here provisi he obl o merj notified	hy accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.		
	C T Corporation System San	بالممانيين ماء	Assistant Secretary