

· (Re	equestor's Name)				
(Ac	ldress)	<u> </u>			
	idress)				
(Ci	ty/State/Zip/Phon	e #)			
· PICK-UP	☐ WAIT	MAIL			
[(Bu	usiness Entity Nar	ne)			
(Do	ocument Number)				
Certified Copies	_ Certificate:	s of Status			
Special Instructions to	Filing Officer				
	J. HOI	RNE			
APR 1 0 2024					
;	Office Use Or				



800426910658

PILED 2024 APR -9 PHI2: 36

RECEIVED 2021 APR -9 AH II: 12 SECRETARY / FLORID,

? .

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. :	12000000195					
REFERENCE :	365951 7288091					
AUTHORIZATION :	The same of the sa					
COST LIMIT :	\$ 25.00					
ORDER DATE : March 15, 2024						
ORDER TIME : 4:16 PM						
ORDER NO. : 365951-063						
CUSTOMER NO: 7288091						
CHANGE OF AGENT						
NAME: SN TAMPA, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Amanda Miller						
EXAMI	NER'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. Na	ame of the limited liability company: SN FLORIDA A	, LLC		
2. (a)		(h)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	8390 E VIA DE VENTURA BLVD F-110 #303		8390 E V	IA DE VENTURA BLVD F-110 #303
	SCOTTSDALE, AZ 85258		SCOTTS	DALE, AZ 85258
	10/07/2020		M2000000	08907
3.	Date of filing/registration in Florida	4.	****	Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept, of Stat	c: 2,,,, 2
	CAPITOL CORPORATE SERVICES, INC.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>	三
	515 EAST PARK AVE 2ND FL			PR-9 PH
	TALLAHASSEE	32301		FILED 2024 APR -9 PN 12: 36 新版 表記
(b)	Enter name of NEW Registered Agent and/or NEW Registered			
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office ac	<u>Idress</u> :	
	Corporation Service Company			
	NEW Registered Office Address:			_
	1201 Hays Street	. <u>-</u>		_
	T-U-1	22204		
	Tallahassee FI	_32301 		_
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the operating agreement of the	register ability co of the lin	ed office an ompany, it is nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	Xie E. Cienie	JIL	L CILMI, AU	ITHORIZED PERSON
_	ture of a thember or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provideely reflect a change in the registered office address, I id in writing of this ohange.	ree to ac perform d for in (hereby c	t in this cape ance of my o Chapter 603 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Agent	GRACE	E E. KIRBY	, ASST. VICE PRESIDENT