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	(Requesto	r's Name)				
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	(Ch. (Ch.)	/Zip/Phone	#\			
	(CRY/State	21p/Prione a	#)			
PICK-UP	· [WAIT			L	
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<u></u>	(Business	Entity Name	•)			
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	(Documen	t Number)				
Certified Copies	-	Certificate	s of Stai	tus		
Special Instructions to						
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TALLAHASSEE, FLORIDA

Office Use Only

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

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ACCOUNT NO.	:	12000000195
REFERENCE	:	327754 8441430

AUTHORIZATION :

Houts eleman

COST LIMIT : \$ 35.00

- ORDER DATE : February 21, 2024
- ORDER TIME : 10:39 AM
- ORDER NO. : 327754-019

CUSTOMER NO: 8441430

CHANGE OF AGENT

NAME: CONNECTWISE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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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.

I. N	ame of the limited liability company:	WISE, LLC	
2. (a)	400 N. Tampa Street, Suite 130	(b)	
2. (u)	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Tampa, FL 33602		
	10/12/2020	M20	000009101
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Corporate Creations Network Inc.		
J. (u)	Registered Agent and Registered Office shown on the record	ls of the Florida Dep	I. of State:
	801 US Highway 1		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	North Palm Beach	, FL_33408	2024
(b)	Enter name of NEW Registered Agent and/or NEW Register	cred Office address	2024 MAR -5 P
	Corporation Service Company		77 1
	NEW Registered Office Address:		
	1201 Hays Street		
	Tailahassee	, FL	
change agent v .vas/we	imited liability company is not organized under the or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited ere apphorized by an affirmative vote of the member cler of organization or the operating agreement of t	the registered off d liability compar rs of the limited the limited liabili	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company.
	- Lee Cilver	Jill Cilmi	Authorized Person
I herel provisi he obli o mere	ture of a hember of authorized representative of a member by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi efy reflect a change in the registered office address, i in writing of this change.	ete performance ided for in Chapt , I hereby confirm	of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed in that the limited liability company has been
2	Cu M. Ker	•	Service Company
Signatu	re of Registered Agent	Ami M. Casp	er, Asst. Vice President

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314