From: Sarah Acevedo

5/11/22, 4.01 PM

Division of Corporations



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(((H220001697713)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 : (323)962-3889 Fax Number

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

Email	Address:	
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## LLC REGISTERED AGENT CHANGE PML CAPITAL LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

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		COVE	R LETTER	•					
	gistration Section vision of Corporations								
SUBJECT	PML CAPITAL LLC								
SUBJECT	Name of Limited Liability Company								
Dear Sir or	Madam:								
The enclos	ed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted	for filing.					
Please retu	rn all correspondence concerning thi	s matter to	the following:						
Cheyenr	ne Moseley								
	Name of Person								
Legalzo	om.com, Inc.								
<del></del>	Firm/Company								
101 N. E	Brand Blvd., 10th Floor								
	Address		<del></del>						
Glendale	e, CA 91203								
	City/State and Zip Code		<del></del>						
. –	everfree.com		_						
E-ma	ail address: (to be used for future ann	iual report	notification)						
For furthe	r information concerning this matter.	, please cal	l:						
Cheyen	ne Moseley	800 at (	773-0888 ext	9724					
	Name of Person	— ··· \	Area Code & Day	time Telephone Number					
R D C	rretr/courier address: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301		MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, Florida 32	ns					
E	nclosed is a check for the following	g amount:							
	1 \$25 Filing Fee	ı	S55 Filing Fee & Cer	tified Copy					

## 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.

I. N	ame of the limited liability company: PML CAPITY	AL LLC	, 					
2. (a)	7537 N Lakeside Lane		(b) 7537 N Lakeside Lane					
2. (2)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			lailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
			Paradise Valley, AZ 85253					
	Paradise Valley, AZ 85253	_	Paradise	Valley, AL 00200				
	03/05/2021		M21000002899					
3.	Date of filing/registration in Florida	4		Document number				
5. (a	Joseph Reale							
J. (w.	Registered Agent and Registered Office shown on the records on 1042 S Congress Ave.	:						
	Registered Office Address (MUST BE FLORIDA STREET							
	W Palm Beach, F	L_3340	6					
(b)	UNITED STATES CORPORATION AGENT	UNITED STATES CORPORATION AGENTS, INC.						
\-,	Enter name of NEW Registered Agent and/or NEW Registered Office address:							
	5575 S. Semoran Blvd., Suite 36	5575 S. Semoran Blvd., Suite 36						
	NFW Registered Office Address:	-	<u> </u>					
	Orlando, F	L_3282	.2					
the ch agent	limited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the re liability of the l	gistered office company, it is imited liability	the cusiness office of the registered the change(s) y company or as otherwise provided in				
Is Reve			Joseph Reale					
	ature of a member or authorized representative of a member			Printed or typed name of signee				
(	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple- bligations of my position as registered agent as provie rely reflect a change in the registered office address. ed in uniting of this change. CHEVENNE MOSELEY, ASSISTANT SECRET, STATES CORPORATION AGENTS, INC.	gree to dee perforded for it hereby	act in this cape mance of my on Chapter 605 canfirm that of ED	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				