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i H.M.

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 503037

COST LIMIT : \$ 25.00

AUTHORIZATION

ORDER DATE : June 18, 2024

ORDER TIME : 2:57 PM

ORDER NO. : 503037-009

CUSTOMER NO: 8453481

CHANGE OF AGENT

NAME: WEMLO, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

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)	4800 T-Rex Avenue,		(b) :	5075 S. SYRACUSE STREET
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(~)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE. 305		_	
	Boca Raton, FL 33431		DENVER, CO 80237	
	03/03/2021		M:	121000005388
	Date of filing/registration in Florida	4.		Document number
. (a)				
	Registered Agent and Registered Office shown on the records o CT CORPORATION SYSTEM	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	1200 S. PINE ISLAND ROAD			
	PLANTATION . F	33324 L_		TARY OF STAHASSEE.
				SS A
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			M 8 OF ST
	and with the state of the state	o contra		8: 22 STATE FL
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	32301		
nge nt w /we	mited liability company is not organized under the la or changes are made, the Florida street address of the cill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe: lability c of the lir	red o omp nite	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided it.
	/S/ Ward Morrison	W	ard N	Morrison, President & CEO
gnat	ure of a member or authorized representative of a member			Printed or typed name of signce

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 notified in writing of this change.

Signature of Registered Agent Grace E. Kirby, Asst. Vice President