## M2100000 8791

	(Requestor's Name)					
	(Address)	- ··-				
(Address)						
<u> </u>	(City/State/Zip/Phone #)					
PICK-U	P WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I200000019 REFERENCE : 548244 AUTHORIZATION : COST LIMIT : \$ 25.0 ORDER DATE : July 12, 2024 ORDER TIME : 4:27 PM ORDER NO. : 548244-041 CUSTOMER NO: 7591740 -----CHANGE OF AGENT NAME: RTBD, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Shauna Godbolt

EXAMINER'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.

١.	Na	me of the limited liability company:			
2 (	a)		(F	.)	
<b>2</b> . (	,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		210 Simmons Street		210 Simr	mons Street
		MARYVILLE, TN 37801	<del></del>	MARYVII	LLE, TN 37801
		07/12/2021		M2100006	08791
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				
	(4)	Registered Agent and Registered Office shown on the records of CT CORPORATION SYSTEM	the Florida	Dept. of Stat	te:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		1200 SOUTH PINE ISLAND ROAD		_	
		PLANTATION . FL	33324		PILED 2024 JUL 17 AM II: 53 TALLAHASSEE FLORID
(	b)				ASSEE.
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	<u>dress</u> :	m. 3 11
		Corporation Service Company	_		AMII: 53
		NEW Registered Office Address:			- DA <b>3</b>
		1201 Hays Street			_
		Tallahassee FL	32301		_
chai agei was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere bility co f the lim	d office an mpany, it i ited liabilit	Id the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
		ill McManus	Will	McManus,	Authorized Person
Si	gnat	ure of a member or authorized representative of a member		_	Printed or typed name of signee
I he prov the to m noti	Jiea	oy accept the appointment as registered agent and agrished of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	ee to act performa I for in C pereby co	in this cap ince of my hapter 603 infirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
<u>بر</u>		e of Registered Agent			
_		Kirby, Asst. Vice President			