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	(Requestor's Name)				
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-	(City/State/Zip/Phone #)	<u></u>			
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	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of S	Status			
Special Instructions to Filing Officer:					
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

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

ACCOUNT NO. : I2000000195						
REFERENCE : 059079 4302216						
AUTHORIZATION: Long 12 Por 12						
COST LIMIT : \$ 25.00						
ORDER DATE : October 18, 2022						
ORDER TIME : 2:09 PM						
ORDER NO. : 059079-015						
CUSTOMER NO: 4302216						
CHANGE OF AGENT						
NAME: SUPER ATV, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker 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.

1. Na	me of the limited liability company: SUPER ATV, I	LC	· · · · · · · · · · · · · · · · · · ·	<u> </u>
2. (a)		(1	h)	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2753 Michigan Road		2753 Mic	chigan Road
	Madison, IN 47250		Madison,	IN 47250
	08/13/2021		M2100001	0595
3.	Date of filing/registration in Florida	— 4.		Document number
	Incorp Services, Inc.			
5. (a)	Registered Agent and Registered Office shown on the records of	Tthe Florid	a Dept. of Stat	_ te:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u></u>	_
	17888 67th Court North			202
	Loxahatchee	33470		2007
(b)				<u> </u>
(b) .	Enter name of NEW Registered Agent and/or NEW Registere	d Office at	<u>ldress</u> :	
	Corporation Service Company			月の 9 1 3 3 7 3 3 7 3 7 3 7 3 7 3 7 3 7 3 7 3
	NEW Registered Office Address:	-		_
	1201 Hays Street			_
	Tallahassee F	L_32301		_
change agent w was/we the artic	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cless of organization or the operating agreement of the fill.	e register iability co of the lin a limited i	ed office an ompany, it is nited liabilit	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in impany.
Signan	are of a member or authorized representative of a member			Printed or typed name of signee
provisio the obli to mere notified	y accept the appointment as registered agent and ag ins of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	ree to act performed for in C hereby co	in this cape ance of my e Thapter 605 onfirm 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
	Fulcina Bahou			