12/20/23, 3:53 PM

Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (614)573-3996

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

Email	Address:		

LLC REGISTERED AGENT CHANGE JRGO, LLC

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To:

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. Na	ame of the limited liability company: JRGO, LLC			
2. (a)	105 W. 4th Street		(b) 105 W. 4th Street	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Clare, MI 48617		Clare, MI	48617
	15/15/2021		M2100001	7096
3.	Date of filing/registration in Florida	— 4.		Document number
5 (a)	API PROCESSING - LICENSING, INC.			
5. (a)	Registered Agent and Registered Office shown on the records of	te:		
	Registered Office Address (MUST BE FLORIDA STREET 3419 GALT OCEAN DRIVE, STE A	· ,		
	FORT LAUDERDALE , F	L_33308		
(b)	C T Corporation System			
(U)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-
	C T Corporation System	# 		
	NEW Registered Office Address:		··	_
	1200 South Pine Island Road	_		
	Plantation F	L_33324		
he cha igent v vas/wo he arti	imited liability company is not organized under the lainge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	nws of the regliability of the limited	gistered office company, it imited liabili	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	ture of a member or authorized representative of a member			Printed or typed name of signee
rovisi he obl	by accept the appointment as registered agent and assists of all statules relative to the proper and completing attentions of my position as registered agent as providely reflect a change in the registered affice address of the writing of this change. C T Corporation System	e perfor led for it Hiereby 1	mance of mix a Chapter 60 confirm that	pacity. 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 en, Assistant Secretary
Signatu	re of Registered Agent			