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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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а	nnual	report	mailin	gs.	Enter	only	one	email	add:	ress	used <b>(fo</b> r please,	**)	02 <sup>1</sup>

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## LLC REGISTERED AGENT CHANGE **REVNOW LLC**

Certificate of Status 0 Certified Copy 0 Page Count 02 Estimated Charge \$25.00

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## 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. No	ame of the limited liability company:REVNOW LLC								
2. (a)	100 South Ashley Drive	(h)	(b) 100 South Asnley Drive						
2. (a)	Principal office address of limited Rability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)							
	STE 600 - #1409	STE 600 - #1409							
	Tampa FL 33602	Tampa FL 33602							
	12/17/21	N	21000017280						
3.	Date of filing/registration in Florida	4.	Docu	ment number					
5. (a)	Corporation Service Company								
<i>5.</i> (a)	Registered Agent and Registered Office shown on the records of								
(0)	1201 Hays Street		9 2						
	Registered Office Address (MUST BE FLORIDA STREET A		FILE 2024 NOV 25						
	Tallahassee, FL	32301	301						
	Northwest Registered Agent LLC		FILED DV 25 PH 5:						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>ess</u> :	· 高品 38						
	7901 4th St N								
	NEW Registered Office Address:								
	STE 300								
	St. Petersburg , FL	33702							
the cha agent v was/wi the art	imited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registe ability com of the limit	ered office and t apany, it is herel ed liability com	he business office of the registered by confirmed that the change(s) pany or as otherwise provided in					
Signa	Hire of a member or authorized representative of a member	Nat Sr		d or typed name of signee					
I here provisi the obl to mer notifie	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I ld in writing of this change.	performar d for in Ch hereby con	n this capacity	I further garee to comply with the					
Signatu	Taylor Newman - Assistant Service of Registered Agent								