(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 11/18/2024	<u>.</u>	**WALK IN**
ENTITY NAME Pens	acola Member LLC	
DOCUMENT NUMBE	ER	
	PLEASE FILE T	THE ATTACHED AND RETURN
XXXXXXXX	Plain Copy Certified Copy	
	Certificate of Statas	
	PLEASE OBTAIN THE	FOLLOWING FOR THE ABOVE ENTITY
	Certified Copy of Arts	s & Amendments
	,,,,,	s & Amendments Complete File (Inclading Annaal Reports)
	Certificate of Status i	Reflecting:
	APOSTILLE'/	NOTARIAL CERTIFICATION
COUNTRY OF DESTING NUMBER OF CERTIFIC		
TOTAL OWED \$ 25.0	0	ACCOUNT # 120160000072
Please call Tina at	the above number for	any issues or concerns. Thank you so much!

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)	235 W. AIRPORT BLVD		(b) 235 W. AIRPORT BLVD		
(-/	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	· ·	,	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	
	PENSACOLA, FL 32505		PENSAC	COLA, FL 32505	
	01/26/2022		M2200000	01272	
	Date of filing/registration in Florida	4.		Document number	
	COGENCY GLOBAL INC.				
(a)	Registered Agent and Registered Office shown on the records Registered Office Address (MUST BE FLORIDA STREET 115 N. CALLIQUIN ST. STE 4	· ·	_	ate:	
(a)	Registered Office Address (MUST BE FLORIDA STREET 115 N CALHOUN ST STE 4	ET ADDRES	_	ate:	
(a)	Registered Office Address (MUST BE FLORIDA STREET 115 N CALHOUN ST STE 4 TALLAHASSEE	ET ADDRES	_		
	Registered Office Address (MUST BE FLORIDA STREE 115 N CALHOUN ST STE 4 TALLAHASSEE Platinum Agent Services LLC	FL 32301	<u>s)</u>		
	Registered Office Address (MUST BE FLORIDA STREET 115 N CALHOUN ST STE 4 TALLAHASSEE	FL 32301	<u>s)</u>		
(a)	Registered Office Address (MUST BE FLORIDA STREE 115 N CALHOUN ST STE 4 TALLAHASSEE Platinum Agent Services LLC	FL 32301	<u>s)</u>		
	Registered Office Address (MUST BE FLORIDA STREET 115 N CALHOUN ST STE 4 TALLAHASSEE Platinum Agent Services LLC Enter name of NEW Registered Agent and/or NEW Registered.	FL 32301	<u>s)</u>	2024 NI	

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Isl Leo Friedman	Leo Friedman		
saure of a member or authorized representative of a member	Printed or typed name of signee		

Signature of a member or authorized representative of a member

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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.

Isl Steven Friedman - Platinum Agent Services LLC President

Signature of Registered Agent