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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*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 MARICK GROUP, LLC

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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

Florida	Marick G	ralli	11C		
1. Na	me of the limited liability company: Marick G	ilou	J, LLO		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			address of limited liability company:  — MAY BE POST OFFICE BOX)	
	8618 Westwood Center Drive, Suite 240		8618 Westwo	ood Center Drive, Suite 240	
	Vienna Virginia 22182		Vienna Virgin	ia 22182	
	01/20/2022		M220000	01286	
3.	Date of filing/registration in Florida	4.	Docu	ment number	
5. (a)	C T CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROAD  Registered Office Address (MUST BE FLORIDA STREET)  PLANTATION, FI			FILED 2022 AUG 18 PH 2: 50 SEUSETARY OF STATE STALLAHASSEE, FL	
(b)	Northwest Registered Agent I		<i></i>	2: 50 STATE	
<b>\-</b> /	Finter name of NEW Registered Agent and/or NEW Registered 7901 4th St N	l Office	address:		
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	3370	)2		
the cha agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of the organization or the operating agreement of the	the re ability of the I	gistered office and t company, it is here mited liability com	the business office of the registered by confirmed that the change(s) pany or as otherwise provided in	
	Margan Nather			gan Noble	
Signature of a member or authorized representative of a member			Printed or typed name of signee		

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 an infiled in yeiting of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent