## MZZCCCCOZG

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



600388337726

SECRETARY OF STATE

RECEIVED

2022 MAY 24 PM 3: 37

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

ACCOUNT NO.	:	1200000001	95				
REFERENCE	:	705020	7986366				
AUTHORIZATION	:	July 8					
COST LIMIT	:	\$ 25.00	e for				
ORDER DATE : May 24, 2022							
ORDER TIME : 2:32 PM							
ORDER NO. : 705020-005							
CUSTOMER NO: 7986366							
CHANGE OF AGENT							
NAME: DISTRIBUTION AGENCY PARTNERS,							
LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland							
		NER'S INITI	Mrc.				
£2	run, i T ;	MILLITY O THITTI	. ————————————————————————————————————				

## 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	ume of the limited liability company:	AGEN	CY PARTNE	RS, LLC
2. (a)	8625 TAMIAMI TRAIL NORTH, SUITE 202			MIAMI TRAIL NORTH, SUITE 202
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  NAPLES, FL 34108	_		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  FL 34108
3.	2/24/2022  Date of filing/registration in Florida	<b>-</b> 4.	M2200000	2979 Document number
5. (a)				
( )	Registered Agent and Registered Office shown on the records of t CAPITOL CORPORATE SERVICE, INC.	he Flori	da Dept. of State	<u>.</u> e: <u></u>
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 515 EAST PARK AVENUE, 2ND FLOOR			ECRE!
	TALLAHASSEE, FL	32301		ARY CAR
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  Corporation Service Company <u>NEW Registered Office Address</u> :  1201 Hays Street			9:33 STATE STATE HASSEE, FL
	Tallahassee	32301		-
change agent v was/we the was/we Stellar I here provisi the obli- to mere notified	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of organization or the operating agreement of the least of organization or the operating agreement of the least of organization or the operative of a member on authorized representative of a member of all statutes relative to the proper and complete proper in the proper and complete proper of all statutes relative to the proper and complete proper of the proper of the proper and complete proper of the proper of the proper and complete proper of the p	registe bility c f the lin imited SE	red office and ompany, it is mited liability com TH COHEN	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.  Printed or typed name of signee