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(R	equestor's Name)
- (Δ	ddress)
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(A	ddress)
	ity/State/Zip/Phone #)
(C	ity/State/Zip/Prione #)
PICK-UP	WAIT MAIL
(R	usiness Entity Name)
(5	USING S ETERY METHO)
(D	ocument Number)
Certified Contes	Certificates of Status
	Commence of Chalos
Special Instructions to File	ing Officer:

Office Use Only



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2024 HAY 21 PH 12: 39 TALLAHÁSSÉE, TLUHÍÐA

FILED

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallnassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : 1200000019	5
REFERENCE : 459336	8447339
AUTHORIZATION 2	
COST LIMIT TO SEE TO SE	<i>,</i>
<i>t</i> r	
ORDER DATE : May 6, 2024	
ORDER TIME : 2:19 PM	
ORDER NO. : 459336-033	
CUSTOMER NO: 8447339	
	-
CHANGE OF AGENT	
NAME: GROWMAIL, LLC	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING	G:
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Shauna Godbolt	
EXAMINER'S INITIA	LS:

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.

2. (a)	ame of the limited liability company: 15955 LA CANTERA PKWY. Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			15955 LA	CANTERA P	KWY.		
(u)					Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	SAN ANTONIO, TX 78256	_	-	SAN ANT	ONIO, TX 782	256		
	12/29/2022		M	2300000	0038			
3.	Date of filing/registration in Florida	4.			Document nu	mber		
5. (a)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREE			ept. of State	- e: -			
	1200 SOUTH PINE ISLAND ROAD			- 2				
	PLANTATION	-L_33324			-	TALLA!	12 AVH 1202	-17
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Corporation Service Company	ed Office g	<u>ıddr</u>	ess:	-	TALLAHÁSSÉE, FLCRÍÐA	21 PM 12: 39	LED
	NEW Registered Office Address:			 -	-	HÜÄ	39	
	1201 Hays Street							
	Tallahassee F	L_32301			-			
change egent v vas/we he arti	imited liability company is not organized under the learning or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cless of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and as	ne registe liability of of the line limited	red om mite lial	office and pany, it is ed liability pility com Jill Cil	d the business hereby confir v company or apany. Imi, Authorize Printed or typed	office of the med that the state of the med that the state of the median of the state of the sta	ne regist ne chang se provi on	ered ge(s) ded in
provisi he obl o merc	ons of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address. If in writing of this change.	e perforn led for in I hereby o	nane Che	ce of my a apter 605, arm that t	hities, and I ar F.S. Or, if the he limited liah	n familiar nis documen pility compo	with and ant is being any has	tin me l accept ng filed been

459336-33

FILING FEE: \$25.00

INHS18 (2/14)