Division of Corporations

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Engler the email address for this business entity to be used for future annual report mailings. Enter only one email address please. mail Address:___

LLC REGISTERED AGENT CHANGE LEGENDARY PRODUCTS 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.

| | ame of the limited liability company: | · | | | |
|------------------------------|---|------------------------------------|-------------------|---|---|
| (a) | Principal office address of limited liability company: | | (b) | Mailing address | of limited liability company: |
| | (<u>Note: MUST BE STREET ADDRESS)</u> | | | (<u>Note: MAY</u> | BE POST OFFICE BOX) |
| | LOUISVILLE, KY 40205 | | - | LOUISVILLE, KY 4020 |)5 |
| | 05/26/2023 | | Ν | .123000007295 | |
| | Date of filing/registration in Florida | 4. | _ | Document n | umber |
| (a) | CORPORATION SERVICE COMPANY | | | | |
| (41) | Registered Agent and Registered Office shown on the records o | f the Flori | da E | Dept. of State: | |
| | 1201 HAYS STREET | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRES | <u>55)</u> | | |
| | | | _ | | 20 |
| | TALLAHASSEE | 22201 | | | 2024 HAR Sign (1) |
| | , F | L_32301 | | | AR I |
| b) | United Agent Group Inc. | | | | |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> | d Office a | ddr | ress: | 19 至 1 |
| | 801 US Highway 1 | | | | HAR -8 AH 4: 08 |
| | NEW Registered Office Address: | | | | गि |
| | North Palm Beach | 33408 L | | | |
| | .F | L | | <u></u> | |
| nge nt w /wc | mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the | e register lability coof the li | red om mite | office and the busines ipany, it is hereby conf ed liability company or | s office of the registered irmed that the change(s) |
| aa | le Lopez | Jac | le l. | opez, Attomey-in-Fact | |
| gnat | ure of a member or authorized representative of a member | | | Printed or type | ed name of signee |
| | y accept the appointment as registered agent and ag | ree to ac | 1 in | rthis capacity. I further or of my duties, and L | er agree to comply with t am familiar with and acc |
| rel visio obli iere | ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. I I'm writing of this change. | ed för in hereby a | Chi Cnj | apter 605. F.S. Or, if i firm that the limited lid | his document is being fil ibility company has been |