M2300000 8967

	(Re	equestor's Name)	
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	(Ac	ldress)	
	(Ac	ldress)	
		,	
•	(C:	ty/State/Zip/Phone	-
 	(CI	ty/State/Zip/Pflone	z #)
	PICK-UP	MAIT	MAIL
	(Bu	isiness Entity Nan	ne)
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		Continue	a f Status
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Office Use Only



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2024 MAR 19 PH 2:59
SECRETARY OF STATE
TALLAHASSEE

2024 MAR 19 PM 4: 03

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 355671 7677461			
AUTHORIZATION CONTRIBUTION			
COST LIMIT : \$ 25.00			
ORDER DATE : March 7, 2024			
ORDER TIME : 2:14 PM	SE E	2021	
ORDER NO. : 355671-060	ORE)	2024 KAR 19	*41
CUSTOMER NO: 7677461	NEW YEAR	9	4
CHANGE OF AGENT	OF STATE	PH 2: 59	
NAME: THE REI LENDER, LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY			
XX PLAIN STAMPED COPY CONTACT PERSON: Amanda Miller			

EXAMINER'S INITIALS:

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	ime of the limited liability company:	ER, LLC					
		110 Main Street	(h	1				
2. (a)		Principal office address of limited liability company: (Note: NIUST BE STREET ADDRESS)	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Beckley, WV 25801						
		07/11/2023		M230000	08967			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	Northwest Registered Agent LLC.						
3. (a	(a)	Registered Agent and Registered Office shown on the records of 7901 4th Street N, Suite 300	the Florida	Dept. of Sta	atc:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			SECRE	2021 HAR 19		
		St. Petersburg , FI	33702		MAR 19 PH		R 19	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	l Office add	Iress:	_	EE. FL	PH 2:59	y di general Maxes
		NEW Registered Office Address:						
		1201 Hays Street						
		Tallahassee, FI	32301		_			
cha age	ange ent w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the services registered ability corotte find the limited	d office ar npany, it i ted liabili	nd the business office is hereby confirmed t ty company or as othe	e of the reg	gistered ange(s	1 }
		Jill Cilmi	Jill C	ilmi, Auth	orized Person	- 6 - 1		
	_	ure of a member or authorized representative of a member			Printed or typed name of		المادين	
pro the to i	ovisio obli mere	y accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I	ree to act to performa d for in Co hereby co	n inis cap nce of my hapter 60. nfirm that	ditiv. I juriner agree duties, and I am fam 5, F.S. Or, if this doc the limited liability c	e to complition with cument is company l	and ac being fi as bee	me cept îled n
noi	ijiea	I'm writing of this change.			vice Company			
Sig	inatur	e of Registered Agent	Ami M.	Casper,	Asst. Vice Presid	lent		