M24000001612

(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:				
J. HORNE WILL WANT				





200433286062

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2024 AUG 21 AM 9: 09

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RECEIVED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
For any issues please contact
Cheyanne Davis
(850) 202-1882

Date: 08/	21/2024	(850) 202-1882
Name:	Cheyanne Davis	
Reference #:	2334618	
	IRG GRO	JP, LLC
☐ Articles of	Incorporation/Authorization to Tr	ansact Business
✓ Change of		
Reinstater	ment	
Conversio	n	
Merger		
Dissolution	n/Withdrawal	
Fictitious N	Name	
Other		
Authorized Amou	nt: \$25.00	-
Signature:	Characters.	_

+44 (0)20.3961.3080



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#. I20000000088 For any issues please contact Cheyanne Davis

Date:08	3/21/2024	(850) 202-1882						
Name:	Cheyanne Davis							
	2334618							
Entity Name: IRG GROUP, LLC								
Articles o	of Incorporation/Authorization to 1	ransact Business						
Amendm	ent							
Change of the control of th	of Agent							
Reinstate	ement							
Conversi	on							
☐ Merger								
☐ Dissolution	on/Withdrawal							
Fictitious	Name							
Other								
Authorized Amo	unt: \$25.00	<u> </u>						
Signature:	Onyunction_							

F: +852.2682.9790

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.

L. N	ame of the limited liability company:		IRG	GROUP, LLC			
2 (a)			(b)				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		((/)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	no change	_		no change			
		_	**-				
	6/17/2024			M24000007692			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	REGISTERED AGENT SOLUTIONS.	INC.					
. (a)	Registered Agent and Registered Office shown on the records of	the Flo	rida Dept. of S	tute:			
	2894 REMINGTON GREEN LN.						
	Registered Office Address (MUST BE FLORIDA STREET A	1DDR	ESS)	_			
	TALLAHASSEE , FL		32308			202	
(b)	Cogency Global Inc.				. 	2024 AUG 2	
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		- : . .	32	
	115 North Calhoun Street, Suite 4				·	2	
	NEW Registered Office Address:				- (-) 	AM 9: 10	
	Tallahassee , FL		32301				
the ch agent was/w	Imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ligger authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	vs of the reability of the	egistered off company, i limited liabi	ice and the business office t is hereby confirmed that lity company or as otherw ompany.	e of tl the c	he reg hange	gistered c(s)
/s/ Michelsa Calderon Signature of a member or authorized representative of a member				Michelsa Calderon Printed or typed name of si	121341C		
l here provis the oh to mei	why accept the appointment as registered agent and agreeious of all statutes relative to the proper and complete digations of my position as registered agent as provided by reflect a change in the registered office address. If all meriting of this change.	ree to perfo d for i hereh	act in this cormance of m in Chapter 6 v confirm th	• •	-	ply w h and s bein has l	ith the accept g filed seen
	/s/ Tim Mayville						
Signat	ure of Registered Agent						