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Thank you!

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.

(a)		(p)			
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				of limited liability company: BE POST OFFICE BOX)	
	9470 Corkscrew Palms Cir., Ste 201				Corkscrew Palms Cir., Ste 201	
	Estero, Ft. 33928	Estero, FL 33928				
				· · · · · · · · · · · · · · · · · · ·		
	09/25/2024		M240	00012295		
•	Date of filing/registration in Florida	4.		Document n	umber	
. (a)	Registered Agent and Registered Office shown on the records of	the Florie	la Dent	of State		
	YEZEK, ANTHONY	die i lori	a Dept.	or muc.		
		ADDRES				
	Registered Office Address (MUST BE FLORIDA STREET) 9470 CORKSCREW PALMS CIR. STE 201		<u> </u>		207	
					F1LE 2025 APR 17	
	ESTERO , F	L33928		-	- 2 -	
	C T Corporation System				PR IT 配	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				是 80	
					8: -	
	NEW Registered Office Address:					
	1200 South Pine Island Road			<u> </u>		
	Plantation p	33324				
	,	·			1 1 1 6	
the cha agent	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	liability of the lace limited	compai mited l Hiabili	ny, it is hereby cor liability company (nfirmed that the change(s) or as otherwise provided in	
<u> </u>	ature of a member or authorized representative of a member				ped name of signee	
I here provis the ob	why accept the appointment as registered agent and a jons of all statutes relative to the proper and comple ligations of my position as registered agent as provided in the registered office address, and in writing of this change. C T Corporation System, Leslie Martin	gree to die perfoi led for it I hereby	ict in the mance in Chap is confirm	his capacity. I furt of my duties, and uer 605, F.S. Or, i m that the limited	her agree to comply with the I am familiar with and accep f this document is being filed liability company has been	

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