1/28/2025 05:24:3: CST . To: 18506176383 Page: 1/2 Fax: 8134365206

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H250000321343)))



H250000321343ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Fmail	Address:			

LLC REGISTERED AGENT CHANGE WASH RESCUE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

1/28/2025 05:24_34_PST To 18506176383 Page: 2/2 Fax: 8134365206

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: Wash Re	scu	e LLC		
2. (a)				Mailing address of limited Hability company:	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	7901 4th St N STE 300	7901 4th St N STE 300			
	St. Petersburg FL 33702	St. Petersburg FL 33702			
	12/23/24		M24000016124		
3.	Date of filing/registration in Florida	4.		Document number	
i. (a)	UNITED STATES CORPORATION AC	3EN	rs, INC.	_	
. (0)	Registered Agent and Registered Office shown on the records of a 476 RIVERSIDE AVE.	e :			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>(S)</u>	-	
	JACKSONVILLE FL.	2	FIL 2025 JAN 28 38 797 LAN 1311 ANDASS		
(b)	Northwest Registered Agent L	LC		N 28	
101	Enter name of NEW Registered Agent and/or NEW Registered	in i			
	7901 4th St N	0F ST 8			
	NEW Registered Office Address:				
	STE 300			• • • • • • • • • • • • • • • • • • •	
	St. Petersburg , FL	3370	2	_	
he cha gent w vas/we he arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg bility (f the li limited	istered office company, it i mited liabilit	e and the business office of the register s hereby confirmed that the change(s) y company or as otherwise provided in apany.	
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been potified in writing of this change.

Taylor Newman - Assistant Secretary

Signature of Registered Agent