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(Ř	equestor's Name)	
	MR. RAY CANN	ION
	AMAZING SPAC 1605 Suwanne	E SELF-STORA
	Wayeross, GA	31501
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PICK-UP	☐ WAIT	MAIL
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	usiness Entity Name	e)
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(D	ocument Number)	
Certified Copies	Certificates	of Status
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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 608.416 or 608.508, 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.

3 , .	•	_	
1. The name of the limite	ed liability company i	s: Punacle Developmen	nt Company LTD., LL
		company is : <u>1605 Suwa</u>	_
WAYCROSS, GA	31501		
		1.1 # · ma	2000000
		<u> </u>	300000091 number
3. Date of filing/registrat	ion in Florida	4. Document n	umber
5. The name of the register Florida Department of		ristered office address as shown	on the records of the
-	Bob CAMde	n	
	Bob Camde	Name	-
	3422 PAlm	Ave.	
		Address	-
	Fr. Mycrs, A	L 33901	
	City	Ave. Address L 33901 V, State and Zip	- 7A € 0
6. The name and address of the new registered agent and/or office:			F
	John Potte	Name Im Ave.	3 N =
		Name	
	3422 PA	In Ave.	<u> </u>
	Florida street addre	ss (P.O. Box NOT acceptable)	FILED 04 DEC 27 PM 5: 17 TALLAHASSEE FLORIDA
	FT. Mycrs	FL 33901	\mathbf{p}_{i}
	City,	FL 3390/ , State and Zip	~
confirmed that after the cl and the business office of liability company, it is her of the members of the lin or the operating agreemen (Signature of a member or author	hange or changes are the registered agent very confirmed that the nited liability compant of the limited liabil Member rized representative of a me	d under the laws of the State of made, the Florida street address will be identical. Or, in the case he change(s) was/were authorizely or as otherwise provided in the ity company.	s of the registered office e of a Florida limited ed by an affirmative vote
(Printed or typed name of signee)	•		
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608 F.S. Or, if the address I hereby confirm	intment as registered is of all statutes relati d accept the obligation this document is being that the limited liability.	agent and agree to act in this cover to the proper and complete pons of my position as registered a filed to merely reflect a chang lity company has been notified in	apacity. I further agree to performance of my duties, agent as provided for in e in the registered office in writing of this change.
(Signature of Registered Agent)		<u> </u>	
Division	n of Corporations, F	P.O. Box 6327, Tallahassee, Fl	L 32314