Requestor's Name Richard Sidders 12221 Mastin Cove Road Jacksonville, Florida 32225-5101 Office Use Only NUMBER(S), (if known): CORPORATION NAME(S) & DUCUIVALLE 3:3410--3 --01041--005 00 *****35.00 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy ☐ Will wait Photocopy Mail out Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials

CR2E031(1/95)

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of

FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: Juners 1b. Date of incorporation Document number 2. The name and address of the current registered agent and office: J& MASSOCIATES, INC. 1503 OAK STREET JACKSONVILLE, FLORIDA 32204 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Richard Sidders 12221 Mastin Cove Road. The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

Such change was authorized by resolution duly adopted by its board of directors or by

an officer so authorized by the board.

SIGNATURE (Registered Agent)

DATE /2/18/26

Kichard Sidders, V-Press
Typed or printed name and title

Division of Corporations, P.O. Box 6327, Taliahassee, FL 32314

CR2E045 (7-91) FILING FEE: \$35.00