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Account#: I20000000088

Date:	09/29/2023				
	Juliana				
	#:2131881				
		ND-RON, INC.			
☐ Artic	eles of Incorporation/Authorizati	on to Transact Business			
Ame	endment				
✓ Change of Agent					
Reinstatement					
Conversion					
☐ Merger					
☐ Dissolution/Withdrawal					
Fictitious Name					
☐ Othe	er				
Authorized Signature:	Amount: \$25,00 \$ 3	55.00 JP			

F: 800.944.6607

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

statement of cha	nge is submitted for a corpora	02, 617.0502, 607.1508, or 617.1508, Florid ation organized under the laws of the State over registered agent, or both, in the State	of Florida		
	in order to change its registered office or registered agent, or both, in the State of Florida. LAND-RON, INC.				
2. The principal	office address: No Change				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification:May	/ 14, 2005 Document number:	000-929-563		
	I street address of the current r tment of State: (If resigned, er	registered agent and registered office on file nter resigned)	e with the		
	CT CORP	ORATION SYSTEM			
	1200 S	PINE ISLAND RD	FILI 2023 SEP 29 TÄLLÄHÄSS		
	PLANTA	ATION, FL 33324	SEP 29 PI		
6. The name and (if changed):	street address of the new regi	istered agent (if changed) and /or registered	- mg - 111		
	COGENCY GLO	BAL INC.	RIDA RIDA		
	115 North Calho		<u>.</u>		
	Tallahassee, FL	32301			
The street addre as changed will	ess of its registered office and be identical.	the street address of the business office o	f its registered agent.		
Such change wa authorized by th	is authorized by resolution du be board, or the corporation ha	ly adopted by its board of directors or by as been notified in writing of the change.	an officer so		
/s/ RONALD K	S/RONALD KARPIUK RONALD KARPIUK Authorized Person Signature of an officer or director Printed or typed name and title		ized Person Ftitle		
I further agree t performance of a gent. Or, if thi	o comply with the provisions my duties, and I am familiar v s document is being filed mer	d agent and agree to act in this capacity of all statutes relative to the proper and cwith and accept the obligation of my positively to reflect a change in the registered of notified in writing of this change.	ion as registered		
/s/ Timothy N		9/29/2023			
· ·	half of an entity:	Date			

Timothy Mayville , Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *