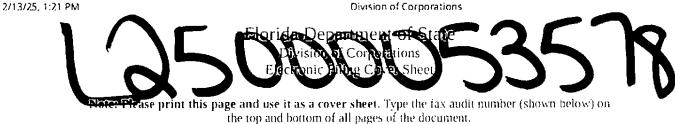
Division of Corporations



(((H25000056441 3)))



H2500005544134BC

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From:

Account Name : REGISTERED AGENTS INC.

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

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LLC REGISTERED AGENT CHANGE HOLMAR FINANCIAL SOLUTIONS LLC

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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 605.0114 or 605.0116, Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L Na	une of the limited liability company:	CIAL SOLUT	ONS LLC			
2. (a)		(b)				
· ()	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address	is of limited liability company: Y BE POST OFFICE BOX)		
	7901 4th St N STE 300	1	429 RIVERBOAT DR			
	St. Petersburg FL 33702	KINDRED FL 34744				
	01/30/25	L2	5000053578			
3.	Date of filing/registration in Florida	4.	Document i	number		
5. (a)	HOLMQUIST, JUAN C					
. (c l }	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	7901 4 I H S ľ N					
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)				
	STE 300					
	ST. PETERSBURG FL	33702		_		
	Northwest Registered Agent LLC		2025			
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	7901 4th St N			FILE 2025 FEB 13 1		
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg	33702		9		
the cha agent v was/we the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the register ability comp of the limite	red office and the bus pany, it is hereby con d liability company o	siness office of the registered afirmed that the change(s) or as otherwise provided in		
Signal	WWW S-WWW N/W (use of a member or authorized representative of a member		Printed or typ	red name of signee		
I herei provisi the obl to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I f I in writing of this change.	performane d for in Che hereby conf	this capacity. I further of my duties, and lepter 605, F.S. Or, if irm that the limited lepter 1	her agree to comply with the I am familiar with and accep I this document is being filed liability company has been		
Signatur	Taylor Newman - Assistant Se	ecretary				