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Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

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

្សីរEmail Address:______

LLC REGISTERED AGENT CHANGE MOORE ECOLOGICAL ANALYSIS AND MANAGEMENT, LLC

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T. LEMIEUX

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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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Floria	la.	•	. ,	
L N	ame of the limited liability company: Moore Eco	ological An	nalysis and Management, LLC	
2. (a)		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	06/14/21		21000275165	
3.	Date of filing/registration in Florida	<u>-</u>	Document number	
5. (a)	MOORE, JENNIFER F Registered Agent and Registered Office shown on the records of the state of th	of the Florida Dep	ot, of State	
	Registered Office Address <u>(MUST BE FLORIDA STREE</u>	T ADDRESS)		
	3142 NW 12TH STREET			
	GAINESVILLE .1	1. <u>32609</u>		
(h)	Northwest Registered Agent	LLC		
((1)	Enter name of NEW Registered Agent and/or NEW Registers	ed Office address	· · · · · · · · · · · · · · · · · · ·	
	7901 4th St N		923 F	
	NEW Registered Office Address:		-<	
	STE 300			
	St. Petersburg	_{1.} 33702	FH 5: 3	
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registere liability compa of the limited	te of Florida, it is hereby confirmed that aftered office and the business office of the registrany, it is hereby confirmed that the change(solution) limits the change of the provided in the provide	srec i
	1005 SOUTH		NAT SMITH	
Siona	ture 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 notified in writing of this change.

Taylor Newman - Assistant Secretary

Signature of Registered Agent