**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000345950 3)))



H2000034595034BC

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

| To:            | Division of Co   | ornorations                                     |          |
|----------------|------------------|---|----------|
|                |                  | : (850)617-6383                                 |          |
| From:          |                  | _   | 1        |
|                |                  | : REGISTERED AGENTS INC.                        | 2020 OC  |
|                |                  | - : I20090000081 —                              |          |
|                | Phone            | : (307)200-2803                                 |          |
|                | Fax Number       | : (855)330-1010                                 | 芸士       |
|                |                  | Vá  | TITY     |
| **Enter the e  | email address fo | or this business entity to be used for ${ m N}$ | ikite 41 |
|                |                  | Francisco mail address places **                |          |
| annual         | report mailings. | . Enter only one email address please.**        | ~ (/)    |
| annual         |                  | Enter only one email address prease.            | S RO     |
| annual Email A |                  | Enter only one email address please.            |          |
| annual         |                  |   |          |
| annual         | ddress:          |   |          |

## Certified Copy0Page Count02Estimated Charge\$25.00

Certificate of Status

## Filed on wrong entity

Electronic Filing Menu

Corporate Filing Menu

☆ 州elbKEb

OCT 0 6 2020

## 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.

| 1. N   | ame of the limited liability company: GRUPO  | FERNAND  | EZ SERVICES, LLC   |  |  |  |
|--|--|--|--|--|--|--|
|  | 001 COUTH DOVAL DOINGIANA PLVD   | (b) 901 SOUTH ROYAL POINCIANA BLVD.  |  |  |  |  |
| 2. (a)   | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |  |  |  |  |
|  | MIAMI, FL 33166 MIAMI.   |  | , FL 33166   |  |  |  |
|  | 10/13/2003   | L03000   | 0039159  |  |  |  |
| 3.   | Date of filing/registration in Florida   | 4.   | Document number  |  |  |  |
| <i>-</i> ,   | , FLORIDA CORPORATE SERVICES, LLC  |  |  |  |  |  |
| 5. (a  | Registered Agent and Registered Office shown on the records of the Florida Dept. of State:   |  |  |  |  |  |
|  | 3006 AVIATION AVENUE   |  |  |  |  |  |
| Registered Office Address (MUST BE FLORIDA STREET ADDRESS) |  |  |  |  |  |  |
| SUITE 2A   |  |  |  |  |  |  |
| COCONUT GROVE FL 33133                                     |  |  |  |  |  |  |
|  | F.   | 1,   | _  |  |  |  |
| (b)  | Registered Agents Inc.   |  | TAS XI   |  |  |  |
| (-)  | Enter name of NEW Registered Agent and/or NEW Registere  | 2020 OC<br>SECRE   |  |  |  |  |
|  | 7901 4th St N  |  |  |  |  |  |
|  | NEW Registered Office Address:   |  | er e   |  |  |  |
|  | STE 300  |  |  |  |  |  |
|  | St. Petersburg   | <sub>L</sub> 33702   | D<br>STATE<br>LORIDA   |  |  |  |
| the chagent was/w  | limited liability company is not organized under the la<br>tange or changes are made, the Florida street address of<br>will be identical. Or, in the case of a Florida limited la<br>were authorized by an affirmative vote of the members<br>ticles of organization or the operating agreement of the | of the registered officiability company, it of the limited liabil            | ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in  |  |  |  |
| R:L  | Tak .  | Riley Park   |  |  |  |  |
| Sign   | ature of a member or authorized representative of a member   |  | Printed or typed name of signee  |  |  |  |
| provi:<br>the ol<br>to me<br>notifi                        | eby accept the appointment as registered agent and agions of all statutes relative to the proper and completed ligations of my position as registered agent as provided rely reflect a change in the registered office address, led in spitting of this change.  Bill Havre - Assista                  | e performance of m<br>ed for in Chapter 60<br>hereby confirm tha             | pacity. I further agree to comply with the<br>y duties, and I am familiar with and accept<br>05, F.S. Or. if this document is being filed<br>at the limited liability company has been |  |  |  |
|  | Bill Havre - Assista   | nt Secretary   |  |  |  |  |