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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

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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

ı)			(b)	.			
Princi	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	RICKELL AVENUE, SUITE			1000 B	BRICKELL A	VENUE, S	UITE	400
MIAMI,	FL 33131		_	MIAMI	, FL 33131			
04/22/200	05			L0500	0040134			
Da	nte of filing/registration in Flori	ida	4.	-	Document	number		
a) CORPO	RATE MAINTENANCE SE	RVICES	LLC					
Registered A	gent and Registered Office shown on t	he records of	the Flori	da Dept. of S	tate:			
Registered C	Office Address (MUST BE FLORIT	DA STREET A	ADDRE!	<u>SS)</u>		10		
-	Office Address (MUST BE FLORIT		ADDRES	<u>SS)</u>		A Cas	2020	
•		400	3313			SECRE TALLA	2020 FEB	
MIAMI	RICKELL AVENUE, SUITE	, FI	3313			SECRE LUK TALI /JPA-98	2020 FEB 3 F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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1000 BF MIAMI North Enter name of	west Registered A	400 , FI Agent L	3313 LC	31		SEORE LUK DE STATE TALLEZH (SSEE), FL	2020 FEB 3 AM 10: 53	i i i i i i i i i i i i i i i i i i i
1000 BF MIAMI North Enter name of 7901	RICKELL AVENUE, SUITE West Registered A of NEW Registered Agent and/or NE	400 , FI Agent L	3313 LC	31		SECRELLAR OF STATE TALE AT POSSEE, FL	2020 FEB 3 AM 10: 53	
1000 BF MIAMI Northy Enter name of	West Registered A of NEW Registered Agent and/or NE 4th St N tered Office Address:	400 , FI Agent L	3313 LC	31		SECRE LAK DE STATE TALE AR POSSEE, FL	2020 FEB 3 AM 10: 53	

:d was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member	Morgan Noble 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 the change. CloveTom Glover - Assistant Secretary

Signature of Registered Agent