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Electronic Filing Cover Sheet

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| To: | To: Division of Corporations Fax Number : (850)617-6383 | | | | |
|------------|---|-------------|--------------|-------------------------|---------------------|
| From: | Account Name : REGISTERED Account Number : I2009000008 Phone : (307)200-28 Fax Number : (855)330-10 | 1 03 | | HASSILLUM | 2019 JAN 15 AM 9: 4 |
| *Enter the | email address for this business report mailings. Enter only on | s entity to | be used | d for futui lease.** | re 🗘 |
| annual | report maitings, enter only on | e emait add | ,, c 3 5 p c | | |
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| | Address: | NT CHAN | GE | | |
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| | LLC REGISTERED AGE CARTH & HUXLE | NT CHAN | GE | T. CLI | ~ 4 |
| | LLC REGISTERED AGE CARTH & HUXLE Certificate of Status | NT CHANG | GE | | 20 |

Electronic Filing Menu

Corporate Filing Menu

Help

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.

| I. Na | ime of the limited liability company: Carth & I | Huxley, LLC | <u> </u> | | | | |
|--------------------------------------|---|---|---|-------------------------|----------------------|--|--|
| 2. (a) | 301 YAMATO RD. | (b) 301 Y | (b) 301 YAMATO RD | | | | |
| 2. (II) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | | | |
| | SUITE 1240 | SUITE | 1240 | | | | |
| | Boca Raton, FL 33431 | Boca Ra | Boca Raton, FL 33431 | | | | |
| | 05/15/17 | L17000 | 107560 | | | | |
| 3. | Date of filing/registration in Florida | 4. | Document num | ber | | | |
| 5 (1) | SIROTA, CRAIG | | | | | | |
| 5. (a) | Registered Agent and Registered Office shown on the records of | f the Florida Dept of Sta | - te: | | | | |
| | 250 NE 25TH ST | | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | | | 2019 | | | |
| | 1007 | | | ب شد | JAN | | |
| | Miami F | L33137 | _ | . خۇ ئارى دارى | 2: ∵i | , | |
| a . | Registered Agents Inc. | | | A STATE | P. | i i | |
| (b) | Enter name of NEW Registered Agent and/or NEW Registere | d Office address: | _ | 25 | 9: | C | |
| | 7901 4th St N | | | Ē | 64 | | |
| | NEW Registered Office Address. | | _ | | | | |
| | STE 300 | | _ | | | | |
| | St. Petersburg | L_33702 | _ | | | | |
| the cha agent was/w | limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | of the registered offic liability company, it of the limited liabili | ee and the busine is hereby confirm ity company or as | ss office ned that t | oi the re he chan | egisterec gc(s) | |
| Siena | ature of a member or authorized representative of a member | MICYFAIK | Printed or typed n | name of sign | nee | | |
| I here provis the ob to mer | thy accept the appointment as registered agent and agions of all statutes relative to the proper and completing the statutes of the proper and completing the statutes of my position as registered agent as providely reflect a change in the registered office address, had any of this change. | gree to act in this cap e performance of my led for in Chapter 60 I hereby confirm tha nt Secretary | | | | with the d accep ing filed been | |
| Signati | ne of Registered Agent | • | | | | | |