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## COVER LETTER

SUBJECT: Sasieta Law PLLC			
	e of Limited l	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	e Change an	I fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the	following:	
Dana Sasieta Name of Person			
Traine or Certain			
Sasieta Law PLLC			202
Firm/Company			2022 JUL 22
1732 SW 103rd Pl			50 122
Address		•	F)
			()
Miami, FL 33134  City/State and Zip Code		<u> </u>	(သ ငည
dana@sasietalaw.com E-mail address: (to be used for future annu	al report pati	tivation)	
	•	neattory	
For further information concerning this matter, p	Mease call:		
Dana Sasieta	at ( 727	) 480-2004	
Name of Person	\	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
14114146666, 14. 52511		Tallahassee, FL 32303	
Enclosed is a check for the following :	ımount:		
■ \$25 Filing Fee		55 Filing Fee & Certified Copy	
INHS18 (2/14)			

## 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.

			(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				limited liability company: EPOST OFFICE BOX)
	2655 LeJeune Road, Suite PH-1 F		2655	LeJeune Road, Suite l	PH1-F
	Coral Gables, FL 33134		Coral	Gables, FL 33134	
	6-10-2022		L17000	0140889	
3.	Date of filing/registration in Florida	4.		Document nun	nher
5. (a)	Alejandro Sasieta				
	Registered Agent and Registered Office shown on the records of				
					0.3
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>		2022 UUL
	121 Alhambra Plaza Suite 1500				` ' ( <u>=</u>
	Coral Gables , F	L 33134			2.3
					2 .
(b)				<del>_</del>	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office	address:	_ <del>_</del>	√ņ.
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	address:		
(b)	Enter name of NEW Registered Agent and/or NEW Registered  NEW Registered Office Address:	d Office	address:	<del>_</del>	<u>့ာ</u> 'ခ
(b)		d Office	address:		<u>့ာ</u> 'ခ
(b)	NEW Registered Office Address:	d Office	address:		<u>့ာ</u> 'ခ
(b)	NEW Registered Office Address:				<u>့ာ</u> 'ခ
If the I change agent v was/wo	NEW Registered Office Address: 2655 Le Jeune Road, PH1-F	L 33134 ws of the registe iability of the li	ne State o cred offic company, imited lia	of Florida, it is hereb te and the business o , it is hereby confirm ability company or a company.	ເກີ ເວີ by confirmed that after the office of the registered ned that the change(s)
If the I change agent v was/wa the arti	NEW Registered Office Address:  2655 Le Jeune Road, PHT-F  Coral Gables  mited liability company is not organized under the la or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members	L 33134 ws of the registe iability of the li	ne State o ered offic company imited lia I liability	of Florida, it is hereb te and the business o , it is hereby confirm ability company or a company.	ey confirmed that after the office of the registered ned that the change(s) s otherwise provided in