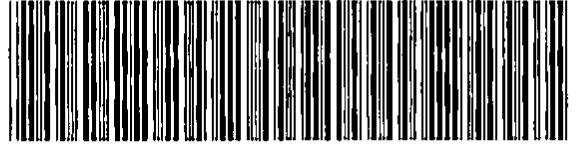


L18000 102 808



900331397689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

07/29/19--01009--005 **25.00

Special Instructions to Filing Officer:

Office Use Only

2019 JUL 29 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FL

AUG -1 2019
C Kinsey

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. Name of the limited liability company: Sam 1 Holding LLC

2. (a) 1350 S Biscayne Point Rd (b)
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Miami Beach, FL
33141

3. 7-15-19 Date of filing/registration in Florida 4. L180000102808 Document number

5. (a) Poirot Frederic
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1350 S Biscayne Point Rd,
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Miami Beach
FL 33141

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Bizien Sonia
NEW Registered Office Address:
1350 S Biscayne Point Rd
Miami Beach FL 33141

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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] Signature of a member or authorized representative of a member Bizien Sonia 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.

[Signature] Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
2019 JUL 29 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FL