L19000070437

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COVER LETTER

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations						
UBJECT: CAPFLOWS LLC Name of Limited Liability Company						
Name of Lin	нее спартну Сотрану					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Valentina Lugo						
Name of Person						
Firm/Company						
1007 N Orange St. 4th Floor Suite #1050						
Address						
Wilmington, Delaware 19801						
City/State and Zip Code						
agent@firstbase.io						
E-mail address: (to be used for future annual repo	rt notification)					
For further information concerning this matter, please of	all:					
Valentina Lugo at (, 9293050668					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount	t:					
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

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.

. (a)	4413 W Beach Park Dr		(b) 4413 W Beach Park Dr		
. (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)	
	Tampa, FL 33609	_	Tampa,	FL 33609	
	03/19/2019	_	L190000	70437	
	Date of filing/registration in Florida	4.		Document number	
. (a)	Bryan Kazimierowski				
. (u)	Registered Agent and Registered Office shown on the records of t 4413 W Beach Park Dr	he Flori	da Dept, of Stat		
	Registered Office Address (MUST BE FLORIDA STREET)	DDRE.	<u>SS)</u>		
	Tampa, FL	3360	FILE 2023 HAR -6 SECRETARY FALL AHASSS		
(h)	Firstbase Agent LLC			ASSI A	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			FILED RETARY OF ANASSEELS	
	111 NE 1st St, 8th Floor Suite #88592		ED MIO: 07		
	NEW Registered Office Address:	•		- ···	
	Miami , FL	3313	2	_	
he cha igent v vas/wa	imited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reg ibility f the li	gistered offic company, it mited liabili	te and the business office of the registere is hereby confirmed that the change(s) ty company or as otherwise provided in	
	- Frans	B	ryan Kazim		
	ture of a member of authorized representative of a member			Printed or typed name of signee	
provisi he obi o mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I i din writing of this change.	ee to a perfor d for in hereby	ict in this cap mance of my i Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	Valentina Lugo re of Registered Agent				