Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:	
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LLC REGISTERED AGENT CHANGE 10X WHIRLYBIRD HOLDINGS, LLC

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AUG 2 4 2021

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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 Florida.

. Na	nne of the limited liability company: 10X WHIRLYB		DINGS, LLC		
!. (a)	18909 NE 29TH AVE	(1	(b) 18909 NE 29TH AVE		
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing ad	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	AVENTURA, FL 33180-2807	····	AVENTURA, FL 3	3180-2807	
	12/11/2020	.	L20000380037		
3.	Date of filing/registration in Florida	4.	Docume	cument number	
5. (a)	CARDONE, GRANT				
. (u)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET) 18909 NE 29TH AVE	T ADDRES	<u>Si</u>		
(b)	AVENTURA F	L_33180-2	807	20 20	
	Corporate Creations Network Inc.			SECRETION STREET	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			SECRETARY OF STATE OF CORPORATION POP CORPORATION POP TO A MIO: 17	
	NEW Registered Office Address:			S FA OR AL	
	801 US Highway 1			7	
	North Palm Beach	7L33408			
change igent v was/w	limited liability company is not organized under the lie or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne register liability of of the lir le limited	ed office and the bu ompany, it is hereby nited liability compa	siness office of the registered confirmed that the change(s) any or as otherwise provided in	
ک در	ature of a member of authorized representative of a member		Printed or typed name of signee		
I here provis the ob-	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	e perjorn led for in	t in this capacity. 1 j ance of my duties, a Chapter 605 F.S. C	further agree to comply with the and I am Jamiliar with and accept or if this document is being filed	
	Sean Arno, Special Secretary				
Signati	ure of Registered Agent				