M1500000 6355

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
ertified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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Ra Change



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: June 16, 2020

Order#: 319875-004

Re: ARISGLOBAL HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Baronie

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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. N	lame of the limited liability company: ARISGLOBAL	HOLDING	5, LLC	
2. (a)	3119 Ponce de Leon Blvd	(b)	3119 Pond	ce de Leon Blvd
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Coral Gables, FL 33134		Coral Gab	les, FL 33134
	August 10, 2015			M15000006355
3.	Date of filing/registration in Florida	4.	!	Document number
5. (a)			
J. (a	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State	:
	Abbhi, Sankesh			
	Registered Office Address (MUST BE FLORIDA STREET	, − ,		
	3119 Ponce de Leon Blvd			20 20
	CI Cables	22124		
	Coral Gables F	L		75 OF 19
				(−, 1)
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office add	ress.	
	time name of New Negatered regent and stage of the second	o o mee		
	Corporation Service Company			5 4 550
	NEW Registered Office Address:			••
	1201 Hays Street			
		22204		
	Tallahassee, F	L32301		
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registered iability cort of the limited li	d office and npany, it is ted liability ability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
	/s/ Praveen Hebballi	Auth	orized Pers	
	nature of a member or authorized representative of a member			Printed or typed name of signee
I her provi. the oi to me notifi	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, l ed in writing of this change.	gree to act i e performa ed for in C hereby co	in this capa nce of my a hapter 605, nfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
	rdoey M Barone			
_	ture (if Registered Agent ley M. Baronie, Asst. Vice President of Corporation Service Comp	any		
	Division of Cornerations P.O.	Box 6327	 Tallahas 	see, FL 32314

FILING FEE: \$25.00