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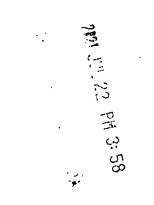
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COVER LETTER

Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for Please return all correspondence concerning this matter to the following: Sylvia Sannia Name of Person Pluscpa PA Firm/Company 104 Crandon Boulevard. Suite 300B Address Key Biscayne, FL 33149 City/State and Zip Code sylvia@sanniacpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sylvia Sannia Name of Person Area Code & Daytin Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 3214 Tallahassee, FL 3214	
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Taflahassee, FL 33	orations Jahassee Street, Suite 810
Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$55 Filing Fee & Certific	

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	ame of the limited liability company: Ventus Elite LLC						
2. (a)	888 Brickell Key Drive #1504, Minmi, FL 33131		(ው)	888 Brick	ell Key Drive #1504	, Miami	FL 33131
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`			Mailing address of lim (Nate: MAY BE P		
3.	June 30, 2021	- - ,	L	110003011			
۵.	Date of filing/registration in Florida Tania Landivar	4.			Document number	ſ	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 888 Brickell Key Drive #1504 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-		73 73 73 73
	Miami	33131			•		ند د <u>.</u>
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(b)							N
	Enter name of NRW Registered Agent and/or NRW Registered (Office ad	kirc	<u> </u>			PH
	Pluscpa PA						ယ္
	NEW Registered Office Address:						(J)
	104 Crandon Blvd. Suite 300B						w
	Key Biscayne, FL 3	13149					٠
change agent w was/we the artic	mited liability company is not organized under the laws or changes are made, the Plorida street address of the mill be identical. Or, in the case of a Florida limited liab re suthorized by an affirmative vote of the members of these of organization or the operating agreement of the liability.	egistere ility co the lim mited l	ed o mp iteo iab	office and any, it is I liability ility comp	the business office hereby confirmed company or as oth	of the	registered change(s)
X Sinnah	ure of a member or sufficiency representative of a member	Teni	3 L	andiver	B	- # - 1 -	
I hereb provision the obli- to mere notified	y accept the appointment as registered agent and agree has of all statules relative to the proper and complete page of all statules relative to the proper and complete page of my position as registered agent as provided for reflect a change in the registered office address, I have a change in the registered office address, I have a change of this change.	to act erforma for in C reby co	in i inci chaj infu		Printed or typed came city. I further agre uties, and I am fam F.S. Or, if this do te limited liability o	•	

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

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