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Division of Corporations

**La000013650**

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011

Phone : (844)386-0178

Fax Number : (214)317-4754

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

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE  
LIBERATION TEAM LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

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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.

1. Name of the limited liability company: LIBERATION TEAM LLC

2. (a) Principal office address of limited liability company  
(Note: MUST BE STREET ADDRESS)  
13727 SW 152ND STREET #939  
MIAMI, FL 33177  
07/21/2020

(b) Mailing address of limited liability company  
(Note: MAY BE POST OFFICE BOX)  
13727 SW 152ND STREET #939  
MIAMI, FL 33177  
L20000213650

3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State  
GERONIMO, KENDRA  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1760 SE 19TH AVE  
HOMESTEAD, FL 33035

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address  
LEGALINC CORPORATE SERVICES INC.  
NEW Registered Office Address  
5237 SUMMERLIN COMMONS BLVD. SUITE 400  
FORT MYERS, FL 33907

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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.

Sabrina Weier

Sabrina Weier

Signature of a member or authorized representative of a member

Printed or typed name of signer

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 of Registered Agent

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