(Requestor's Name)					
(Äddress)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
,					
(Document Number)					
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APR 0 4 2022 ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 583464 8373818

 $\wedge$ 

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: March 31, 2022

ORDER TIME : 2:36 PM

ORDER NO. : 583464-009

CUSTOMER NO: 8373818

\_\_\_\_\_

## CHANGE OF AGENT

NAME: BRUNFELSIA LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

## 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: BRUNFELSIA L	.LC		
2. (a)		(t	o)	
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	701 BRICKELL AVE, SUITE 2100		701 BRIC	CKELL AVE, SUITE 2100
	MIAMI, FL 33131		MIAMI, F	L 33131
	05/12/2015		L15000083	3368
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (u)	Registered Agent and Registered Office shown on the records of CORPORATE CREATIONS NETWORK, INC.	the Florida	Dept. of Stat	re:
	Registered Office Address (MUST BE FLORIDA STREET.	4DDRESS	2	<b>20</b>
	801 US HIGHWAY 1			2022 APR
	NORTH PALM BEACH	33408		R Y
				SS <b>&gt;</b> 77
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	SEE, FLA
		THE WA	<u> </u>	7 A I S
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			_
	TallahasseeF1.	32301		
change agent ' was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registere ability co of the lim	ed office an mpany, it is ited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
/s/Santiago Ulloa Santiago Ulloa				
	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the obt to 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 lad in writing of this change.	ee to act performa I for in C iereby ca	in this cape ince of my o hapter 605 infirm that	acity. 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
Signati	Inc. C.Kubl			
	e E. Kirby, Asst. Vice President  Division of Corporations • P.O. I	3ox 6327	'• Tallahas	ssee, FL 32314

FILING FEE: \$25.00