I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

#### SIGNATURE: ROCKA MALIK

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N12000009412

Entity Name: THE PURPLE GROUP, INC.

#### **Current Principal Place of Business:**

10300 SW 162ND STREET MIAMI, FL 33157

### **Current Mailing Address:**

11371 SW 176TH STREET MIAMI, FL 33157 US

### FEI Number: 30-0752406

# Name and Address of Current Registered Agent:

GARCIA, KIMBERLEY 11371 SW 176TH STREET MIAMI, FL 33157 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: KIMBERLEY GARCIA			03/16/2023
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	SECRETARY	Title	D	
Name	MALIK, ROCKA	Name	ALVAREZ, NOHELY	
Address	11371 SW 176TH STREET	Address	11304 SW 207TH DRIVE	
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33189	
Title	TREASURER	Title	VP	
Name	SECAIDA, ANA	Name	LUGO, MARK	
Address	400 COUNTRY CLUB ROAD	Address	1029 REVERE AVENUE, #113	
City-State-Zip:	JACKSONVILLE NC 28546	City-State-Zip:	THROGGS NECK NY 10465	
Title	DIRECTOR			
Name	GAGE, ALICIA			
Address	16725 SW 99TH COURT			
City-State-Zip:	MIAMI FL 33157			

SECRETARY

03/16/2023 Date

# FILED Mar 16, 2023 Secretary of State 8420318315CR

Certificate of Status Desired: No