| Name and Address of Current Registered Agent: | | | | |
|--|--|-------|----------------------------|------|
| CORPORATE MAINTENACE SERVICES, LLC 1000 BRICKELL AVENUE, SUITE 400 MIAMI, FL 33131 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. | | | | |
| SIGNATUR | SIGNATURE: FEDERICO MAUTONE | | | |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | DIR | Title | D,P | |
| Name | INES DE OLIVEIRA, ELAINE | Name | SCHMIDT DE OLIVEIRA, CARLO | S |
| Address | 16901 COLLINS AVE., UNIT 3205 | | FRANCISCO | _ |

Address

Current Principal Place of Business: 16901 COLLINS AVE., UNIT 3205 SUNNY ISLES BEACH, FL 33160

Entity Name: LAFAC CORPORATION

DOCUMENT# P18000001889

Current Mailing Address:

16901 COLLINS AVE., UNIT 3205 SUNNY ISLES BEACH, FL 33160 US

FEI Number: 82-4017548

Name and Address of Current Registered Agent-

City-State-Zip: SUNNY ISLES BEACH FL 33160

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: INES DE OLIVEIRA, ELAINE

D, CMS AUTH REP

03/28/2024

Electronic Signature of Signing Officer/Director Detail

FILED Mar 28, 2024 Secretary of State 9146954819CC

Certificate of Status Desired: No

16901 COLLINS AVE., UNIT 3205

City-State-Zip: SUNNY ISLES BEACH FL 33160

Date