that my name appears above, or on an attachment with all other like empowered. **REGISTERED AGENT** SIGNATURE: PETER KOSA

Electronic Signature of Signing Authorized Person(s) Detail

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

DOCUMENT# L12000041838

Entity Name: POCO LOCO BY EKI MIKKONEN LLC

Current Principal Place of Business:

253 NE 2ND STREET SUITE 803 MIAMI, FL 33132

Current Mailing Address:

253 NE 2ND STREET **SUITE 803** MIAMI, FL 33132 US

FEI Number: 45-4937862

Name and Address of Current Registered Agent:

KOSA, PETER 253 NE 2ND STREET SUITE 803 MIAMI, FL 33132 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:	PETER KOSA			03/10/2022
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER	
Name	MIKKONEN, ERKKI	Name	KOSA, PETER	
Address	253 NE 2ND STREET SUITE 803	Address	11601 WILSHIRE BLVD SUITE 500	
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	LOS ANGELES CA 90025	

Certificate of Status Desired: No

03/10/2022

Date

FILED Mar 10, 2022 Secretary of State 3434350287CC