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 that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEXANDRE CHAMMAS

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L17000107241

Entity Name: STRATEGY BUSINESS & SOLUTIONS, LLC

Current Principal Place of Business:

8263 LOST CREEK LN DELRAY BEACH. FL 33446

Current Mailing Address:

8263 LOST CREEK LN DELRAY BEACH. FL 33446 US

FEI Number: 82-1865847

Name and Address of Current Registered Agent:

1WAY TAX SERVICES LLC 1701 W HILLSBORO BLVD, STE 208 DEERFIELD BEACH, FL 33442 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	: MARCIA SALVADOR			04/29/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	PRESIDENT	Title	VP	
Name	CHAMMAS, ALEXANDRE	Name	CHAMMAS, LUCIMARA	
Address	8263 LOST CREEK LN	Address	8263 LOST CREEK LN	
City-State-Zip:	DELRAY BEACH FL 33446	City-State-Zip:	DELRAY BEACH FL 33446	

PRESIDENT

04/29/2024

FILED Apr 29, 2024 Secretary of State 3539265634CC

Certificate of Status Desired: No

Date