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.

Name and Address of Current Registered Agent:

SIGNATURE: LILLIAN MICHELSON

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

DOCUMENT# L22000168665

Current Mailing Address:

FEI Number: 88-1991407

MAX GROUP HOLDINGS LLC

9737 NW 41ST ST

DORAL, FL 33178 US

9737 NW 41ST ST

DORAL, FL 33178

9737 NW 41ST ST

DORAL, FL 33178

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196

Entity Name: MAX GROUP UNLIMITED LLC

Current Principal Place of Business:

TitleAUTHORIZED REPRESENTATIVENameMICHELSON, LILLIANAddress9737 NW 41ST STREET #196

City-State-Zip: DORAL FL 33178

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.

AR

SIGNATURE: LILLIAN MICHELSON

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

04/29/2024 Date

04/29/2024 Date

FILED Apr 29, 2024 Secretary of State 4211696743CC