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(((H22000312426 3)))



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Division of Corporations

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Account Number : I20180000011 : (844)385-0178 Fax Number : (214)317-4754

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REGISTERED AGENT CHANGE DADE MOELLER & ASSOCIATES, INC.

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(((H22000312426 3))) STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation	organized under the laws of the	State of N	C	<u> </u>	
	r to change its registered office or t		State of Flo	rida.		
1. The name of t	he corporation: Dade Moeller & Ass	250 H-11				
2. The principal	office address: 200 S Park Rd, Suite	350,Hollywood, FL, 33021				
3. The mailing a	ddress (if different):					_
4. Date of incorp	oration/qualification: 08/16/2010	Document number:	F100000037	701		_
	street address of the current registe trnent of State: (If resigned, enter re		on file with	the		
	CORPORATION SERVICE COMP	ANY				
	1201 HAYS STREET					
	TALLAHASSEE, FL 32301-2525			=!	2022	
6. The name and street address of the new registered agent (if changed) and /or registered o (if changed):			istered offic	CLAHA.	2022 SEP -9	
	LEGALINC CORPORATE SERVI	CES INC.		. S.C.	AM	7
	5237 SUMMERLIN COMMONS B	LVD, SUITE 400			ထဲ	
P.O. Box NOT acceptable				5		
	FORT MYERS, FL, 33907					
The street address changed will	ss of its registered office and the s be identical.	street address of the business of	office of its r	egistered	agent,	
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	lopted by its board of directors en notified in writing of the ch	s or by an of lange.	ficer so		
L.		Richord Tong, Co-Secre	lary			
_	e of an officer or director	Printed or types				
l further agrée i of my duties, an document is bei	the appointment as registered age of comply with the provisions of all different ambient and accept the filed merely to reflect a change been notified in writing of this ch	ll statutes relative to the prope le obligation of my position as in the registered office addre:	r and compl	lete perfo 1gent, Oi Confirm t	rmance r, if this hat the	:
GAL	Ho	09/09/2022				
Śig	nature of Registered Agent	Da	le			
If signing on be	half of an entity:					
Erik Treutlein						
T	ped or Printed Name					

* * * FILING FEE: \$35.00 * * *