F22000004588

(Re	questor's Name)		
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(City	y/State/Zip/Phon	e #)	
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PICK-UP	MAIT	MAIL	
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(Do	cument Number)		
Certified Copies	Certified Copies Certificates of Status		
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Special Instructions to I	Filing Officer:		

Office Use Only



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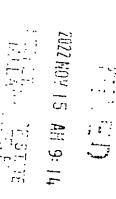
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ALLAHASSEE HA

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A. BUTLER

NOV 16 2022



COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: ASADO LABS, INC. Name of Corporation					
DOCUMENT NUMBER: F22000004588					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matt	er to the following:				
MOISES CARDOSO					
Name of Contact Person					
FILEJET INC.					
Firm/Company					
10440 PIONEER BLVD., SUITE 8					
Address					
SANTA FE SPRINGS, CA 90670					
City/State and Zip Code					
REGISTEREDAGENT@FILEJET	.COM				
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please	call:				
MOISES CARDOSO	259-5955				
Name of Contact Person	at (949) 259-5955 Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Depa	rtment of State.				
Mailing Address:	Street Address:				
Amendment Section Division of Corporations	Amendment Section				
P.O. Box 6327	Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

$^\circ$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0 ange is submitted for a corporation or er to change its registered office or reg	ganized under the laws of the State o	of DELA	WARE	
1. The name of 2. The principa	the corporation: ASADO LABS, INC. office address: 215 NW 24TH STREE	T. SUITE 400, MIAMI, FL 33127			
	address (if different):				
4. Date of incor	poration/qualification: 7/21/2022	Document number: F22000	0004588	-	
	d street address of the current register curtment of State: (If resigned, enter resi		with the		
	CORPORATION SERVICE COMPA	NY			
	1201 HAYS STREET				
	TALLAHASSEE, FL 32301-2525				
6. The name an (if changed):	d street address of the new registered :	ngent (if changed) and /or registered	office !	2022 NOV	
	FILEJET INC.			<u>_</u>	
	625 E. TWIGGS STREET, SUITE 110		· 🤺	<u> </u>	
	P.O). Box NOT acceptable	 5;	Ó	-
	TAMPA, FL 33602-3931			4	
The street addras changed wil	ress of its registered office and the str I be identical.	reet address of the business office o	f its regi	stered	agent,
Such change wanthorized by t	as authorized by resolution duly ado he board, or the corporation has been	pted by its board of directors or by a notified in writing of the change.	an office	er so	
Ja. 16-	- Alexander	JACK ABRAHAM, PRESIDEN	₹Т		
Signat	ure of an officer or director	Printed or typed name an	nd title		
A further ourée	t the appointment as registered agent to comply with the provisions of all : nd I am familiar with and accept the ing filed merely to reflect a change is when notified in writing of this char	statutes relative to the proper and c	complete ered age ereby cor	perfoi nt. Or ifirm t	rmance · if this hat the
1	lul	11/11/2022			
Si	gnature of Registered Agent	Date			
If signing on b	chalf of an entity:				
ANDREW WH	ITE				
	Typed or Printed Name				
	* * * FILING	FEE: \$35.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314