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(Re	questor's Name)	•			
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:				
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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations		•				
SUBJECT: Copper, LLC.					•	
	ne of Lir	nited Li	ability Co	mpany)	·	
(· ·····	01 13.1		uointy Co	, trapear		
Dear Sir or Madam:	. •					•
The enclosed Registered Agent/Registere	d Office	Change	and fee(s	s) are su	bmitted for	filing.
Please return all correspondence concerni	ng this r	natter to	the follo	wing:		
·				٠		•
Karen Karem	•		•			•
(Name of Person)						
					*	
Copper, LLC.						
(Firm/Company)					•	
	•					•
300 Briny Avenue			•	,		
(Address)						
•					,	
Develope Burnity El 20000		٠.				
Pompano Beach, Fl. 33062 (City/State and Zip Code)						
(City/State and Zip Code)	:				•	
					•	
For further information concerning this m	atter, ple	ease call	l: .		•	
	,,,,			•	•	
Karen Karem	at (586	<u>491-44</u>	446	<u> </u>	
(Name of Person)		(Area	Code & D	aytime	Telephone	Number)
						•
STREET/COURIER ADDRESS:		***	A ET TATO	nnnre	aa.	
Registration Section		MAILING ADDRESS: Registration Section				
Division of Corporations		Division of Corporations				
Clifton Building		P.O. Box 6327				
2661 Executive Center Circle		Tallahassee, Florida 32314				
Tallahassee, Florida 32301					,	• .
Enclosed is a check for the follow	ving am	ount:				
<u>_</u>						
☐ \$25 Filing Fee	•	\$55 Filing Fee & Certified Copy				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. Name of the limited liability company: Copper, LLC. 2. (a) Principal office address of limited liability company: 300 Briny Avenue (Note: MUST BE STREET ADDRESS) Pompano Beach, Fl. 33062 (b) Mailing address of limited liability company: 300 Briny Avenue (<u>Note: MAY BE POST OFFICE BOX)</u> Pompano Beach, Fl. 33062 04/11/2000 L00000004181 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Karen Karem Registered Office Address: 16803 31 MILE ROAD RAY, MICHIGAN FL 48096 US (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>: **NEW** Registered Agent: Patick Vivies **NEW** Registered Office Address: 700 East Dania Beach Blvd Suite 202 (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company aram (Signature of a member or authorized representative of a member) Member Manager (Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**

(Signature of Pegiste