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TATEMENT 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 undersig liability company submits the following statement in order to change its registered office of agent, or both, in the State of Florida.	ned limited r registered
1. The name of the limited liability company is: Resiline Systems Computing	q
2. The mailing address of the limited liability company is: 7220 Kl. W. 36 Stre	<u> </u>
Suite 641 Miami, FL 33166	
3. Date of filing/registration in Florida 4. Document number	
5. The name of the registered agent and the registered office address as shown on the records of Florida Department of State: Housson H. Michael Name	of the
<u>9367 Fontambleau Bluel</u> # 6220 Address	
Miami Florida 33172 City. State and Zip	0
6. The name and address of the new registered agent and/or office:	05 M 5
Hassan H. Michael	
7220 N. W. 36th Street Suite # 641 Florida street address (P.O. Box NOT acceptable)	<u>ن</u> ن
Miami, FL 33166 City, State and Zip	52
If the limited liability company is not organized under the laws of the State of Florida, it is her confirmed that after the change or changes are made, the Florida street address of the registere and the business office of the registered agent will be identical. Or, in the case of a Florida lin liability company, it is hereby confirmed that the change(s) was/were authorized by an affirma the members of the limited liability company or as otherwise provided in the articles of organi the operating agreement of the limited liability company.	d office nited
(Signature 6) a member or authorized representative of a member)	
Hassan H. Michael (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I furthe comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as provid Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the register address. I hereby confirm that the limited liability company has been notified in writing of this	r agree to ny duties, ed for in ed office change.
(Signature of Registered Agent)	

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

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