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> JAN 15 2021 I ALBRITTON

COVER LETTER

FO: Registration Section Division of Corporations						
Phoenix International Ventures, LLC						
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matte	r to the following:					
Steven Pribramsky						
Name of Person						
Pribramsky & Company, CPAs						
Firm/Company						
81990 Overseas Hwy Suite 202						
Address						
Islamorada, Fl. 33036						
City/State and Zip Code						
steven@pribramskycpa.com						
E-mail address: (to be used for future annual repo	ort notification)					
For further information concerning this matter, please	call:					
Steven Pribramsky 3	294-8137					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amoun	it:					
□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116. 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. N	lame of the limited liability company: Phoenix Internation	onal Ve	ntures, LLC	
2. (a)			(b)	
, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	81990 Overseas Hwy Suite 202		81990 Ove	erseas Hwy Suite 202
	Islamorada, FL 33036	_	Islamorada	a, FL 33036
	November 27, 2020		L040000872	250
3.	Date of filing/registration in Florida	- 4.		Document number
5. (a	Your Capital Connection, Inc			
J. (ii	Registered Agent and Registered Office shown on the records of	the Flor	da Dept. of Stat	_ e:
				_ ,
Registered Office Address (MUST BE FLORIDA STREET ADD			<u>55)</u>	
	417 E. Virginia St. Suite I			_
	Tallahassee FU	_32301 		!
				<u>j</u> s
(b) Steven Pribramsky				ـ بب
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	i Office	address:	_ မ္ <u>က</u>
	Pribramsky & Company, CPAs			
	NEW Registered Office Address:			_
	81990 Overseas Hwy Suite 202			_
	Islamorada FI	33036		
chang agent was/w the ar Sign	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the authorized representative of a member each accept the appointment as registered agent and agreeins of all statutes relative to the proper and complete	registe ability of the li limited St	ered office and company, it is imited liability I liability comeven Pribramsle ect in this cand	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in appany. ky Printed or typed name of signee activ. I further agree to comply with the
the of to me, notific	sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ged in writing of this change.	d for in hereby	Chapter 605 confirm that	i, F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent			