Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053

Phone : (561)694-8107

Fax Number

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LLC REGISTERED AGENT CHANGE ILS GROUP LLC

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Y SULKER

SEP 22 2020

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. Na	me of the limited liability company: ILS GROUP L	rc		
2. (a)	5200 BLUE LAGOON DRIVE	(b) _	5200 BLUE LAGOON DRIVE	
≟. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(%) =	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	SUITE 500		SUITE 500 MIAMI, FL 33126	
	MIAMI, FL 33126			
	07/14/2005	L(05000071203	
3.	Date of filing/registration in Florida CABRERA, SUSY, ESQ	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 5200 BLUE LAGOON DRIVE			
	Registered Office Address (MUST BE FLORIDA STREET SUITE 500	ET ADDRESS)	20 S	
	MIAMI	FL_33126	2 元	
(b)	Corporate Creations Network Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ered Office addr		
	801 US Highway 1		- 15 E	
	NEW Registered Office Address:			
	North Palm Beach	, FL_33408		
change agent v was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membe icles of organization or the operating agreement of	the registered d liability comers of the limite	pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in	
	/ Caitlin Lazarus Caitlin Laza		Lazarus, Attorney-in-Fact	
	nture of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered affice address d in writing of this change.			

Caitlin Lazarus, Special Secretary

/s/ Caitlin Lazarus

Signature of Registered Agent