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Division of Corporations

Email Address:_____

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

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LLC REGISTERED AGENT CHANGE

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OCT 1 6 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.

Na	ime of the limited liability company: RIB, L					<u>-</u> .	
(a)	1818 SW 1st Ave	(b) <u>1</u>		1st Ave			
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			iling addr e ss o <i>Note: MAY h</i>			
	# 1912	1	912 :	<u> </u>			
	MIAMI, FL 33129	<u>M</u>	IAMI. FL	. 33129			
	02/23/2006	LO	600001	.9984			
	Date of filing/registration in Florida	4.	D	ocument ni	mber		
()	PATRICK VIVIES						
(a)	Registered Agent and Registered Office shown on the records	of the Florida Dej	or, of State:				
	700 E DANIA BEACH BLVD						
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	3				
	202						
	DANIA .	FL 33004			 1	rs-3	
(b)	Registered Agents Inc.				;	2020 OCT	
(10)	Enter name of NEW Registered Agent and/or NEW Register	red Office addres	<u></u>			<u> </u>	ŧ;
	7901 4th St N					ST	· i
	NEW Registered Office Address:				,	<u> </u>	
	STE 300				- -	106	
	St. Petersburg	_{FL} 33702	. •				
e chi entras/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member icles of organization or the operating agreement of the street authorized.	laws of the Sta s of the register I liability comp rs of the limite the limited liab	ed office a pany, it is l d liability ility comp	and the busi hereby conf company of	ness offi irmed tha	ce or c at the c	ie regist hange(s
e art	ature of a member or authorized representative of a member	Riley I					

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 m; duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 655, 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.

Bill Havre - Assistant Secretary

Signature of Registered Agent