

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : GOLIZ LLC
 Account Number : I20210000136
 Phone : (954)655-1817
 Fax Number : (954)758-9108

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: golizllcfl@gmail.com

LLC REGISTERED AGENT CHANGE
SINLYN LLC.

Certificate of Status	0
Certified Copy	0
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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

STATE
 FLORIDA

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7/15/21

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SINLYN LLC
2. The principal office address: 4025 N NOB HILL RD APT 508 SUNRISE FL 33351
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/16/2010 Document number: L10000017778
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNED: DIAMOND HEAD MANAGEMENT LLC

2792 SUCRE AVE

HOLLYWOOD, FL 33026

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

GOLIZ LLC

4025 N NOB HILL RD APT 508

P.O. Box NOT acceptable

SUNRISE, FL 33351

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Lisbeth Feldman

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

07/13/2021

Date

If signing on behalf of an entity:

Lisbeth Feldman

Typed or Printed Name

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