[100003173°

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	; #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer					





30037455141

ALL ARASSEL A

Y SULKER OCT 27 2021 CORPORATION SERVICE COMPANY 1201 Havs Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. :	I2000000195						
REFERENCE :	159856 7779145						
AUTHORIZATION :	Smell de man						
COST LIMIT :	\$25.00						
ORDER DATE : October 22, 2021							
ORDER TIME : 2:56 PM							
ORDER NO. : 159856-043							
CUSTOMER NO: 7779145							
<u>CHANGE OF AGENT</u>							
NAME: CODINA INVESTMEN LLC	NT HOLDINGS,						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker -	- EXT# EXAMINER:						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BO' LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability submits the following statement in order to change its registered office or registered agent, or both, in the State (

l.	Na	me of the limited liability company: CODINA INVES	TMENT	- H	IOLDINGS, LLC
2.	(a)	2020 Salzedo Street, 5th Floor	(b)	2020 Salzedo Street, 5th Floor
	(- -2)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	.~,	Mailing address of limited liability (Note: MAY BE POST OFFICE
		CORAL GABLES, FL 33134	_		CORAL GABLES, FL 33134
		03/23/2010		L	.10000031739
3. 5.	(a)	Date of filing/registration in Florida ROMERO, RAFAEL G	- 4.		Document number
٠.	(11)	Registered Agent and Registered Office shown on the records of 2020 Salzedo Street, 5th Floor	the Floric	la l	Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>(S)</u>	
		CORAL GABLES FL	33134	- -	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office: Corporation Service Company		ddı	<u>rew</u> :
		NEW Registered Office Address: 1201 Hays Street			THE THE
		Tallahassee FL	32301		<u> </u>
cha age was	inge int w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of the organization or the operating agreement of the	register ability c of the lir	ed om nit	office and the business office of the pany, it is hereby confirmed that the ed liability company or as otherw
		Lie & Coni	Jill	Ci	lmi, Authorized Person
I h pro the to n not	erek visio obli nere ifiea X	ny accept the appointment as registered agent and agricust of a member on accept the appointment as registered agent and agricus of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change. Local Lindy For of Registered Agent Kirby Asst. Vice President of Corporation Service Company	ee to ac perform I for in iereby c	t in Ian Ch	Printed or typed name of sign this capacity. I further agree to accept my duties, and I am familic hapter 605, F.S. Or, if this docum firm that the limited liability con