

LI 0000 29 114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

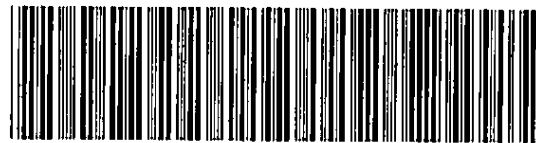
(Business Entity Name)

(Document Number)

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C. GOLDEN

SEP 10 2019

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.

HALL OF FADED, LLC

1. Name of the limited liability company: HALL OF FADED, LLC

2. (a) 8715 NORTHWEST 150 TERRACE (b) 8715 NW 150 TERR

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

MIAMI LAKES, FL 33018

MIAMI LAKES, FL 33018

03/09/2011

L11000029114

3. Date of filing/registration in Florida 4. Document number

UNITED STATES CORPORATION AGENTS, INC.

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
5575 S. SEMORAN BLVD

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

SUITE 36

ORLANDO 32822
. FL

BIANCA PADILLA

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

321 ROMANO AVENUE

NEW Registered Office Address:

CORAL GABLES 33134
. FL

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SD

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

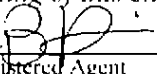


BIANCA PADILLA

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, 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.



Signature of Registered Agent