13000074043

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

Office Use Only



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CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 06/24/25 Order #: 3807385-2 Re: SBR Gems LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

LE WILL

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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.

2 (a)		(h)				
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("	/	Mailing address of limi (Note: MAY BE PO	-		y:
	36 NE 1st St. 134		36 NE	st St. 134			
	MIAMI, FL 33132	_	МІАМІ,	FL 33132			
	05/21/2013		L130000	074043			
3.	Date of filing/registration in Florida	4.		Document number	-		
5. (a)							
	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of S	tate:	i., }	20:	
	Levy, Tessa				,,,,,	2025 JUN 25	سيسدد
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					<u></u>	Ī
	36 NE 1st St. 134				32.	25	-
	MIAMI	33132			AUSTEC N. XVX	P	1
	FL_				- (. 		
(b)					223	9: 16	
()	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	<u>iress</u> :			•	
	Corporation Service Company						
	NEW Registered Office Address:	·		_			
	1201 Hays Street						
	Tallahassee	32301					
	, FL_						
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the rawill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	registere bility co the lim	d office a mpany, it ited liabi	and the business offic t is hereby confirmed lity company or as of	e of the reg	gistere ange(:	:d s)
	farc Goodman			ian, Authorized Perso	n		
Signa	ture of a member or authorized representative of a member			Printed or typed name	of signee		
provisi the obi to m er	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change.	ve to act performa for in C ereby co	in this ca nce of m hapter 6 nfirm tha	ipacity. I further agr y duties, and I am far 05, F.S. Or, if this do u the limited liability	ee to comp niliar with ocument is company h	ly with and a being ias bei	i the ccept filed en

INHS18 (2/14)

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Grace E. Kirby, Asst. Vice President on behalf of Corporation Service Company