Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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|          | Division of Cor   | •               |  |  | . t., 5          |
|          | rax Number        | : (850)617-6383 |  |  | FLORIDA          |
| From:    |                   |                 |  |  | 유물               |
| rrom:    | Account Name      | · CORPORATE CRE | ATIONS INTERNATI   | ONAL INC.  | 87               |
|          | Account Number    |                 |  |  | $\triangleright$ |
|          | Phone             | : (561)694-8107 |  |  |                  |
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| nter the | email address for | this business   | entity to be use   | d for futur  | e                |
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## LLC REGISTERED AGENT CHANGE 1311 INDUSTRIAL LLC

| Certificate of Status | 0       |
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## 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.

| 1. N  | lame of the limited liability company: 1311 IN   | DUSTRIAL LLC   | .,  | · · · · · · · · · · · · · · · · · · ·     |              |    |  |  |
|---|--|--|---|---|--------------|----|--|--|
| 2 (2)                                       | 936 SW 1st Ave, #1072  | (b) C/O Do   | (b) C/O Dorr Asset Managment, LLC   |   |              |    |  |  |
| 2. (4)                                      | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  |  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)      |   |              | _  |  |  |
|   | Miami, FL 33130  | 936 SW   | 936 SW 1st Ave, #1072   |   |              |    |  |  |
|   | Miami, FL 33130  |  |   |   |              |    |  |  |
|   | 09/27/2013   | L130001  | 36639   | <u> </u>                                  |              | _  |  |  |
| 3.  | Date of filing/registration in Florida   | 4.   | Document number   |   |              | _  |  |  |
| 5. (a                                       | Dorr Asset Management, LLC   |  |   | abla                                      |              |    |  |  |
| J. (L                                       | Registered Agent and Registered Office shown on the records  | of the Florida Dept. of Sta  | mte:  | SEE SEE                                   | 2021         |    |  |  |
|   | 936 SW 1st Ave, #1072  |  |   | 亲   | 8            |    |  |  |
|   | Registered Office Address (MUST BE FLORIDA STREE   | _  | IASS  | 2021 OCT 27                               | <u> </u>     |    |  |  |
|   |  |  | _   | EL O                                      | 7            | 11 |  |  |
|   | Miami  | FL 33130   | 33130   |   | AM IO: I     | O  |  |  |
|   | Company Compliant Nationals Inc  |  |   | ÎDA<br>ADA                                | _            |    |  |  |
| (b  | Corporate Creations Network Inc.  Enter name of NEW Registered Agent and/or NEW Registered.  | red Office address:  | <del>_</del>  |   |              |    |  |  |
|   | that have of the state of the s | <u> </u>   |   |   |              |    |  |  |
|   | 801 US Highway 1   |  |   |   |              |    |  |  |
|   | NEW Registered Office Address:   |  |   |   |              |    |  |  |
|   | N. db Dalas Danah  | 22400  |   |   |              |    |  |  |
|   | North Palm Beach   | FL 33408   |   |   |              |    |  |  |
| chang<br>agent<br>was/v                     | limited liability company is not organized under the ge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of | the registered office a<br>I liability company, it<br>rs of the limited liabil<br>the limited liability co | nd the business office of<br>is hereby confirmed that<br>ity company or as othery | the registe<br>t the chang<br>wise provid | ered<br>e(s) | e  |  |  |
| Sign  | nature of a member or authorized representative of a member  |  | Printed or typed name of s  |   |              | _  |  |  |
| I her<br>provi<br>the or<br>to me<br>notifi | rely accept the appointment as registered agent and complessions of all statutes relative to the proper and completely reflect a change in the registered agent as proving the profession of the registered office address, and in writing of this change.  Jenisa lrizarry,   | ete nertormance of my  | duties, and I am familie  5, F,S. Or, if this docur  t the limited liability con  | ar wun and                                | i accet      | н  |  |  |
| Sign  | fure of Registered Agent   | •  |   |   |              |    |  |  |