## 1500044307

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## **COVER LETTER**

Division of Corporations					
SUBJECT: Singularity +	Holdings, LLC Limited Liability Company				
Dear Sir or Madam:	Elimica Blasini, Company				
The enclosed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
Nestor Gorfinkel					
Name of Person	<del></del>				
Registered Services, LLC					
Firm/Company					
2241 Hollywood Blvd.					
Address					
Hollywood, FL 33020					
City/State and Zip Code					
fl.regservices@gmail.com					
E-mail address: (to be used for future annual r	report notification)				
For further information concerning this matter, plea	ise call:				
Nestor Gorfinkel	305 932-5757				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

## 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.	Naı	ne of the limited liability company:	ngu	ar	<u>ity                                    </u>	Holdings,	LLC		
2. (	(a) _	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	J	(b)	{ 	Mailing address of limit	ted liability	• -	<del></del>
				-	-				
		3/11/15			L15	0000 44	307		
3.		Date of filing/registration in Florida	4			Document number	r		
5.	(a)	Registered Agent and Registered Office shown on the reco				<u> </u>			
		Registered Agent and Registered Office shown on the reco REGISTERED SERVICES, LLC	ords of the Fl	lorida I	Pept. of Sta	ite:			
		Registered Office Address (MUST BE FLORIDA ST. 20818 West Dixie Highway	_						
		Aventura	, <sub>FL_</sub> 33	180		_		2015	
							30.70	95. S	****7"
	(b)	Enter name of NEW Registered Agent and/or NEW Reg	istered Offi	ce addı	ess:	<u> </u>	1,5	骤23	erena a France
			<u>-</u> -						; ;;;
		Registered Services, LLC				_		PH 2:	ام ده و سمستان ادر چا
		NEW Registered Office Address:					- 1	<del></del>	٠.,
		2241 Hollywood Blvd.				. <u></u>	*	t	
		Hollywood	, <sub>FL</sub> _33	020		_			
the age	e cha ent v	imited liability company is not organized under ange or changes are made, the Florida street add will be identical. Or, in the case of a Florida lime are authorized by an affirmative vote of the men icles of organization or the operating agreement	ress of the nited liabili nbers of th	regist ity cor e limi	ered offi npany, it ted liabil	ce and the business is hereby confirme ity company or as o	office of d that the	the regi	istered (s)
	Signa	ture of a member or authorized representative of a member	r			Printed or typed nan	ne of signe	;	
pro the	ovisi e obi iner	by accept the appointment as registered agent a ions of all statutes relative to the proper and col- ligations of my position as registered agent as p ely reflect a change in the registered office add d in writing of this change	mplete per vrovided fö ress, I here	to act forma ir in C eby co	in this ca ince of m hapter 6 nfirm tha	spacity. I further ag y duties, and I am f 05, F.S. Or, if this a at the limited liabili	gree to co amiliar w document ty compai	mply wi ith and is beiny iy has b	th the accept g filed een
Si	gnatu	are of Registered Agent	,						
		Division of Corporations•	P.O. Box	6327	• Tallah	assee, FL 32314			

FILING FEE: \$25.00