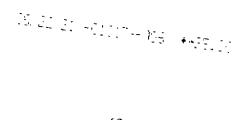
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(Requestor's Name)				
(Address)				
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PICK-UP	WAIT	MAIL		
(Busine	ess Entity Nan	ne)		
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2021 AUG 26 PH 1: 10 SECRETARY OF SINTE

COVER LETTER

TO:	Registration Section Division of Corporations		
cunt	CCT.	CRT CXIV, I	LLC
SUBJ.	ECT:	Name of Limited Lial	pility Company
Dear S	ir or Madam:		
The er	closed Registered Agent/Registered	Office Change and fe	re(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to the fo	llowing:
EUGE	NE H. GAUDETTE		
	Name of Person		-
	Firm/Company		_
P.O. B	OX N		
	Address		-
SANF	ORD, ME 04073		
	City/State and Zip Coo	de	-
•	@ehglaw.com		
I	E-mail address: (to be used for future	annual report notifica	ntion)
For fu	rther information concerning this mar	tter, please call:	
TIFFA	NY CAMIRE	207 at (324-1551
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ving amount:	
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy

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)	Principal office address of limited liability company:	_ ((b) Mailing address of limited liability company:		
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
	10450-10490 WILES RD		280 MEI	RRIMACK STREET	
	CORAL SPRINGS, FL 33076		METHU	JEN, MA 01844	
	APRIL 8. 2015		L1500006	51812	
	Date of filing/registration in Florida	4.		Document number	
(a)			<u></u> .		
	Registered Agent and Registered Office shown on the records of	he Floric	la Dept. of St	tate:	
	CAFUA CONSULTING COMPANY, LLC			<u> </u>	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2021 SEC		
	12236 TILLINGHAST CIRCLE				
	PALM BEACH GARDENS . FL	33418		E P. ZUZI AUG 26 SECRETAGO TALLAGO	
			•		
(b)					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		
				m o	
	NEW Registered Office Address:			_	
	4100 N POWERLINE ROAD, UNIT M1		. <u> </u>		
	POMPANO BEACH	33073			
	. rL			_	
the li	imited liability company is not organized under the law or changes are made, the Florida street address of the	vs of the	e State of F red office a	Florida, it is hereby confirmed that after the	
zent v	vill be identical. Or, in the case of a Florida limited lia	bility c	ompany, it	is hereby confirmed that the change(s)	
	ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the				
		EU	GENE H. C	GAUDETTE	
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee	
	by accept the appointment as registered agent and agr	ou to ac	t in this ca	macity. I further agree to comply with the	

Signature of Registered Agent