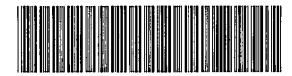
## L15000105967

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





600394332346

09/23/22--01099--001 \*\*625.00

21122 SEF 23 PK 4: 17



## **COVER LETTER**

TO: Registration Section Division of Corporations				
225 NW 74 Street, LLC	-			
SUBJECT:	T:			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and	d fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the	following:			
Benjamin Wolkov				
Name of Person				
Caldera Law				
Firm/Company				
7293 NW 2nd Ave				
Address	<del></del>			
Miami, FL 33150				
City/State and Zip Code	<del></del>			
jesse@caldera.law				
E-mail address: (to be used for future annual report noti	fication)			
For further information concerning this matter, please call:				
Jesse Potterveld 786	321-3811			
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 following amount:

■ \$25 Filing Fee

 $\square$  \$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)		(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7338 NW Miami Court		
	Miami, FL 33150		
	06/17/2015	LIS	5000105967
i.	Date of filing/registration in Florida	4.	Document number
. (a)			
. (u)	Registered Agent and Registered Office shown on the records of	of the Florida De	pt. of State:
	AXS Law Group, PLLC		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	2121 NW 2nd Ave, Suite 201		
	Miami .	33127	
	, 1		<del></del> <u></u>
(b)	Benjamin Wolkov		
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office addre	
			· - 4.
	Caldera Law		
	NEW Registered Office Address:		
	7293 NW 2nd Ave		
	Miami	33150	
hangi gent i vas/w	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registered of liability comp s of the limited	office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
Signa	sture of a member or authorized representative of a member		Printed or typed name of signee
_	•		this capacity. I further agree to comply with

Signature of Registered Agent