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(Address)							
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(Document Number)							
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COVER LETTER

Division of Corporations	
KOI GLOBAL LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
NICHAELA MOE	
Name of Person	
Firm/Company	
100 SW 10TH ST, APT 709	
Address	
MIAMI, FL 33130	
City/State and Zip Code	
KEELAMOE@GMAIL.COM	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
NICHAELA MOEat (305 3189598
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 amou	nt:
☑ \$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.

I. Na	ame of the limited liability company: KOI GLOBAL	LLC					
2. (a)	936 SW 1ST AVE	(b)	(b) 936 SW 1ST AVE				
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		Mailing address of (Note: MAY E			-
	#939		#939				
	MIAMI, FL 33130		MIAMI,	FL 33130			
	02/16/2016	L	160000	32223			
3.	Date of filing/registration in Florida	4.	•	Document nu	ımber		
5. (a)	UNITED STATES CORPORATION AGENTS	S, INC.					
). (a)	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of Sta	— ite:			
	13302 WINDING OAK COURT						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		_			
	A						
	TAMPA	33612		_		19 F	
(b) .	NICHAELA MOE			_		FEB 21	-1
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addr	<u>ess</u> :			Hq	1 :
	100 SW 10TH ST			_	:: :: :::	80 08 H	
	NEW Registered Office Address:				3-	· 6	
	APT 709			_			
	MIAMI	33130					
he cha igent v vas/we he arti	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of organization of the operating agreement of the ture of a member of a member	the registe ability com of the limite limited lia	ered offici pany, it ed liabili bility co	ce and the busing is hereby confinity company or	ness office irmed that as otherw	of the re the chan ise provi	egistered
I herei provisi he obl o merc votified	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I i d'in writing of this change.	performan	ice of mi	pacity. I furthe duties, and I a	er agree to im familia	comply rwith an	d accep