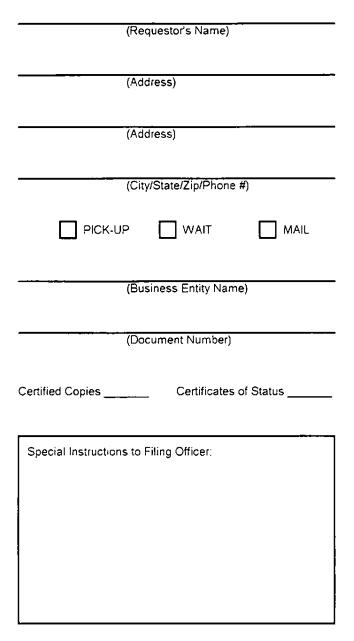
L16000 600 62



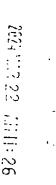
Office Use Only





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COVER LETTER

	gistration Section vision of Corporations	•				
SUBJECT	Cito Remy Holdings, LLC					
зовилет	Name of Limited Liability Company					
Dear Sir or	Madam:					
The enclose	ed Registered Agent/Registered Off	fice Change and fo	ee(s) are submitted for filing.			
Please retur	rn all correspondence concerning th	is matter to the fo	llowing:			
Kylie Conra	nd & Kayla King					
	Name of Person		_			
Corp1, Inc.						
	Firm/Company		_			
7700 E Araj	pahoe Rd Ste 220					
	Address	•	_			
Centennial,	CO 80112					
	City/State and Zip Code					
E-ma	il address: (to be used for future and	nual report notific	ation)			
For further	information concerning this matter	, please call:				
Kylie Conra	เป	720 at (823-9273			
	Name of Person		Area Code & Daytime Telephone Number			
Re Di P.C	railing Address: Egistration Section Vision of Corporations O. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
En	closed is a check for the following	g amount:				
3	\$25 Filing Fee	□ \$55	5 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.

1. Na	me of the limited liability company:	dings, LLC	:		
2. (a)	1801 N. MILITARY TRAIL		(b) 1801 N. MILITARY TRAIL.		
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	SUITE 200		BOCA RATON, FL 33431		
	BOCA RATON, FL 33431				
	03/10/2016		L160000500	062	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY				
5. (a)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	of the Florid	da Dept. of State	- v:	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>SS)</u>	-	
	TALLAHASSEE F	T32301-	2525	7224	
(L)	Registered Agents Inc			22	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-	
	7901 4th St N			H: 26	
	NEW Registered Office Address:			-	
	Ste 300			_	
	St. Petersburg	33702 FL			
change agent was/w the art	imited liability company is not organized under the less 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 MANUEL MACHADO	he registe liability of s of the line limited	red office an company, it is mited liabilit	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.	
Signa	nture of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob- to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provic ely reflect a change in the registered office address, d in writing of this change.	gree to a le perford led for in I hereby	et in this cape nance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been	
/s/ Da	wid Roberts				
Signati	ire of Registered Agent				