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From:

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OCT 0.6 2020

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

Florid		lanage	r I I C	
L Na	time of the fillined transity company.			LICA TODAY MAY
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(t		USA TODAY WAY Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ATTENTION: SUKRIT AGRAWAL		ATTENTION: SUKRIT AGRAWAL	
	MIRAMAR, FL 33025		MIRAM	AR, FL 33025
	08/09/16		L16000	148648
3.	Date of filing/registration in Florida	4.		Document number
	LLOYD GRANET, P.A.			
5. (a)	Registered Agent and Registered Office shown on the record-	s of the Florid	a Dept. of Stat	- e:
	2295 NW CORPORATE BLVD			
	Registered Office Address (MUST BE FLORIDA STRE.	ET ADDRESS)		2020 TAL
(b)	SUITE 235			2020 OCT SECRET
	BOCA RATON	_{.FL} 3343	1	_ <u> </u>
	Registered Agents Inc.			
	Enter name of NEW Registered Agent and/or NEW Register	(NEW Registered Office address:		- 3: 2: 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	7901 4th St N			
	NEW Registered Office Address'			
	STE 300			
	St. Petersburg	. _{FL} 3370	2	····
the chagent was/w the ar	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the member ticles of organization or the operating agreement of attree of a member or authorized representative of a member elby accept the appointment as registered agent and compositions of all statutes relative to the proper and compositions of my position as registered agent as proper and compositions of my position as registered agent as proper and the registered of the address	is of the reg	ompany, it mited fiabili liability co ey Park	er and the husmess of the of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. Printed or typed name of signee
to me.	stigations of my position as registered agena as pro- rely reflect a change in the registered office addres. ed in writing of this change.	s, Thereby	confirm that	t the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

- Assistant Secretary

Bill Havre

Signature of Registered Agent