

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000117102 3)))



H220001171023ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

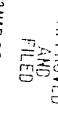
Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.∗∗

Email Address:___

LLC	REG	ISTE	RED AC	GENT	CHAN	GE
INSIG	NEO	FINA:	NCIAL	HOLI	DINGS	LLC

Certificate of Status	0		
Certified Copy	0		
Page Count	02		
Estimated Charge	\$25.00		



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:	INSIGNEO FINANCIAL HOLDINGS LLC				
2. (a)	777 BRICKELL AVENUE, SUITE 1010 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		RICKELL AVENUE, SUITE 1010 ailing address of limited liability company:		
	MIAMI, FL 33131		MIAMI, I	FL 33131		
	10/28/2016			000199573		
 (a) 	Date of filing/registration in Florida HENRIQUEZ, RAUL	4.	Ţ	Document number		
	Registered Agent and Registered Office shown on the records of 777 BRICKELL AVENUE, SUITE 1010 Registered Office Address		Dept. of State:	·-· . 2		
	Miami	L3313	31	2022 HAR		
(b)	Corporate Creations Network Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address			30 PM		
	801 US Highway 1 NEW Registered Office Address:			1 3: 57		
	North Palm Beach , F	L_33408				
change agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered iability con of the limit	l office and ipany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
/s/ Caitlin Lazarus				s, Attorney-in-Fact		
	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to merc	by accept the appointment as registered agent and ag ions of all statules relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act i e performan ed for in Cl hereby con	n this capa nce of my d napter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed at limited liability company has been		

Caitlin Lazarus, Special Secretary

/s/ Caitlin Lazarus Signature of Registered Agent