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SECRETARY OF STATE
ALLAHASSEE

COVER LETTER

TO: Registration Section Division of Corporations	£			
SUBJECT: The Voice DDC, LLC				
· · · · · · · · · · · · · · · · · · ·	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
Kelly R. Duarte				
Name of Person				
THE VOICE DDC, LLC				
Firm/Company				
223 NE 12th Avenue				
Address				
Fort Lauderdale, FL 33301				
City/State and Zip Code				
kellytadros@hotmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter,	please call:			
Gabriela Melo	954 234-6768			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

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. 1	Name of the limited liability company: The Voice DE	OC, LLC		
2. (a	The Voice DDC, LLC	(b) The Voice DDC, LLC		
(-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	223 NE 12th Avenue	223 N	E 12th Avenue	
	Fort Lauderdale, FL 33301	Fort L	auderdale, FL 33301	
	01/1,8/2017	L17000	0014177	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	CIO MANAGEMENT, LLC			
J. (J	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of S	State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1395 BRICKELL AVENUE, STE 650		AH)	
	Miami , FL	33131	2018 APR -3 AM 11:3 SECRETARY OF STATE ALLAHASSEE, FLORID	
(b)	Kelly R. Duarte		AMII: 30 OF STATE OF LORIDA	
•	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	ATE RIDA	
	The Voice DDC, LLC			
	NEW Registered Office Address:		<u> </u>	
	223 NE 12th Avenue			
	Fort Lauderdale	33301		
the ch agent was/w the ard Signal I here provis the oh	limited liability company is not organized under the law ange of changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law in the law is a second of a member of all statutes relative to the proper and complete places of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	the registered off bility company, if the limited liability c Kelly R. Du	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. arte Printed or typed name of signee apacity. I further agree to comply with the conductive and I am familiar with and accept	
Signati	re of Registered Agent			

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