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(((H19000330342 3)))



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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}694-1639

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

Email Address:

110 ....

## LLC REGISTERED AGENT CHANGE RONRUSS RED GINGER, LLC

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## 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	une of the limited liability company: Ronruss Re	d Ginger,	, LLC	
2. (a)	1680 MERIDIAN AVE.	(b)	1680 MERIDIAN AVE	
	Principal office address of limited liability company:  (Note: MUST RE STREET ADDRESS)	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	SUITE 303		SUITE 303	
	MIAMI BEACH, FL 33139		MIAMI BEACH, FL 33139	
	04/06/2018	ι	L17000109601	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	GRUTMAN, DAVID			
``,	Registered Agent and Registered Office shown on the records on 1680 MERIDIAN AVE.	f the Florida I	Dept. of State:	
	Registered Office Address /MUST BE FLORIDA STREET	ADDRESSI	1	
	SUITE 303			
	MIAMI BEACH F	. 33139		
(b)	Corporate Creations Network Inc.  Enter name of NEW Registered Agent and/or NEW Registered  11390 Proposition Forms Possel 4004.5	d Office addi	dress:	
	11380 Prosperity Farms Road #221E  NEW Registered Office Address:			
	TEST REGISTER OTHER AUDIEST.			
	Palm Beach Gardens F	L <sup>33410</sup>		
agent w was/wei	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited the authorized by an affirmative vote of the members also of organization of the operating agreement of the	f the registe lability com of the limit	State of Florida, it is hereby confirmed that after tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in	
	Colour	Carlo	los M Alvarez, Attorney-in-Fact	
	are of a member or authorized representative of a member	_	Printed or typed name of signee	
i nereo provisió the obli to merei notified	y accept the appointment as registered agent and agens of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in syriting of this change.	ree to act in performant of the performant of the contract of	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is heing filed infirm that the limited liability company has been	
Signania	Carlos M Alvarez, Spe	cial Secreta	tary	
Division of Cornorationse P.O. Box 6327e Tellahessee El 32314				

FILING FEE: \$25.00

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November 12, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RONRUSS RED GINGER, LLC 2200 BISCAYME BLVD. MIAMI, FL 33137

SUBJECT: RONRUSS RED GINGER, LLC

REF: L13000157355

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The LLC name that you have on the amendment is RED GINGER SB, LLC it should be ROWRUSS RED GINGER, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy I Lemieux Regulatory Specialist II FAX Aud. #: B19000330342 Letter Number: 819A00023261