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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT:DAS_MM Miami, LLC		
	Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernir	g this matter to the following:	
Kenneth Ray Noble III		
Name of Person		
The Noble Law Firm, P.A.		
Firm/Company		
6199 N. Federal Highway		
Address		
Boca Raton, Florida 33487		
City/State and Zip Co	de 	
Ray@NobleLawFirmPA.com		
E-mail address: (to be used for future	annual report notification)	
For further information concerning this ma]} atter, please call: 	
Kenneth Ray Noble III	at (_561) 353 9300	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
∑ S25 Filing Fee	S55 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 1. Name of the limited liability company: Mailing address of limited liability company: Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) (<u>Noie: MUST BE STREETADDRESS</u>) July 21, 2017 L17000156438 Date of filing/registration in Florida Document number 3. DAS Holding Group Incorporated Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2228 Park Avenue, Suite 2 Registered Office Address (MUST BE)FLORIDA STREET ADDRESS) Miami Beach Noble Law Firm, P.A. (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 6199 N. Federal Highway **NEW** Registered Office Address: **Boca Raton** 33487 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent and agree to act in this capacity. I further agree to comply with the provisions of my duties, and I am familiar with advantage to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a chapter for a cha

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

Signature of Registered Agent