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	From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081				
ф: 1 <b>9</b>		Phone : (307)200-25 Fax Number : (855)330-16	803		
£**	-annual .÷	email address for this busines report mailings. Enter only o	ss entity to be us ne email address p	ed for future blease.**	
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FEB 04 2022

## 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.

Name of the li	mited liability company: Gloma	x, LLC	
	ipal office address of limited liability company (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
08/07/2			7000168085
	ate of filing/registration in Florida	4.	Document number
J. (a)	aximiliano jose		
<del>-</del>	gent and Registered Office shown on the record	, of State;	
	ollins ave		
•	office Address (MUST BE FLORIDA STRE		
<u>apto 210</u>			
miami t	peach	<sub>. Fl.</sub> 33141	
(0)	ered Agents Inc.	22	
Enter name o	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> 7901 4th St N		
7901			FEB -3 M
NEW Regist	ered Office Address:		<u> </u>
STE 30	00		
St. Pe	etersburg	, <sub>FL</sub> 33702	
the change or chan agent will be ident was/were authoriz	ges are made, the Florida street addressical. Or, in the case of a Florida limite	ss of the registered and liability compa ers of the limited	e of Florida, it is hereby confirmed that after d office and the business office of the registered ny, it is hereby confirmed that the change(s) Hability company or as otherwise provided in ity company.
Rilev			
Signature of a memb	per or authorized representative of a member		Printed or typed name of signee
I hereby accept the provisions of all state the obligations of to merely reflect a notified in writing	atutes relative to the proper and comp my position as registered agent as pro change in the registered office addres of this change.	l agree to act in the blete performance vided for in Chap is, I hereby confir stant Secretary	his capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed in that the limited liability company has been

Signature of Registered Agent