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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.

	Name of the limited liability company:		1.			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(D)	Mailing address of l	limited liability co	
	2665 S. Bayshore Dr., #1020		PO Box 330609			
	Coconut Grove, FL 33133		Miam	i, FL 33233		
	11/09/2017		[.17000	1232031		
3.	Date of filing/registration in Florida	4.		Document nun	ıber	
5. (a)	<u></u>				
	Registered Agent and Registered Office shown on the records of	The Florid	la Dopt. of	f Stale:		^ >
	David P. Martin					=== === ===
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				2 / 2 / C	2019 SEP 20
	2665 S Bayshore Dr., #1020			,	\$2.50 \$2.50 \$1.50	ν; . Ο ;
	Coconut Grove					
				 _	_ _	τυ ; R
(ե	Friter name of NEW Registered Agent and/or NEW Registeres				52 J	ب 🛴
	Enter name of NEW Registered Agent and/or NEW Registerer	d Office p	ddress:			70
	C.T Corporation System					
	NEW Registered Office Address:			,		
	1200 South Pine Island Road					
	Plantation Pl	33324				
the c agen was/	c limited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Of, in the case of a Florida limited I were authorized by an attirmative vote of the members rticles of organization or the operating agreement of the	iws of the fee in the region of the line in the line i	e State of sistered of company mited lia	of Florida, it is hereboffice and the busines, it is hereby confirmability company or a company.	ነዩዩ ስ፤በረድ ለ፤ በክ	e registeraci
Sik	miline of a member of authorized representative of a member			Printed or typed	name of signee	
I he provi the o to me notif By:	reby accept the appointment as registered agent and ag isions of all statutes relative to the proper and complet shiligations of my position as registered assent as provide erely reflect a change in the registered office address, I ied in writing of this change. CT Corporation System	ed for in hereby	Chapter Confirm			
Sign	ature of Registered Agent					
	Division of Cornerations & P ()	Ray 63	77 a 11'a11	lahaeene BL 32314		