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(Ad	ldress)			
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A. RAMSET MIN

COVER LETTER

	egistration Section ivision of Corporations		•	
SUBJECT	Blockbit, LLC		→ •	
SOME	Name of Limited Liability Company			
Dear Sir o	or Madam:			
The enclos	sed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.	
Please rett	urn all correspondence concerning th	nis matter to the	following:	
Sydney	Grice			
	Name of Person	-		
Anderso	on Business Advisors			
	Firm/Company		_	
3225 Mc	cLeod Drive, #100			
	Address			
Las Veg	as, NV 89121			
	City/State and Zip Code		_	
ra@and	ersonadvisors.com			
E-ma	ail address: (to be used for future and	nual report notif	ication)	
For further	r information concerning this matter	, please call:		
Christian	n Abraham	800 at (7064741	
	Name of Person		Area Code & Daytime Telephone Number	
Re Di Cl 26	egistration Section evision of Corporations ifton Building 61 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Er	nclosed is a check for the following	g amount:		
2	\$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy	
INHS18 (2/	(14)			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

property of the property of

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.

Na	me of the limited liability company: Blockbit, LLC	,
(a)	1770 Agora Cir.	(b) 155 Cavalier St
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Palm Bay, FL 32909
	Palm Bay, FL 32909	
	1/17/2018	L18000015022
	Date of filing/registration in Florida	4. Document number
(a)	John Lazaridis	
(4)	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	
	Palm Bay	32909 PR T
(b)	Anderson Registered Agents, Inc.	1 Office address:
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:
	625 E. Twiggs Street, Suite 110	1 Office address:
	NEW Registered Office Address:	
	Tampa	33602
	, FL_	·
chai nt w s/we	nge or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited lia	
gnan	ure of a member or authorized representative of a member	Printed or typed name of signee
visio obli nere	w accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ree to act in this capacity. I further agree to comply with a performance of my duties, and I am Jamiliar with and accept for in Chapter 605, F.S. Or, if this document is being fit hereby confirm that the limited liability company has been