L18000068478

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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	05/01/2024			
Name:	Patrice Rush			
Reference	#:2345212			
		NUBIOTECH, LLC		
☐ Artic	cles of Incorporation/Auth	orization to Transact Business		
Am	endment			
✓ Change of Agent				
☐ Rei	nstatement			
☐ Cor	version			
☐ Mer	ger			
☐ Diss	solution/Withdrawal			
☐ Fict	itious Name			
☐ Oth	er			
Authorized	OM	5		

F: 800.944.6607

F: +852.2682.9790

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:		NubioTech, LLC	
. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3350 SW 148th Ave.	_	3350 SW 148th Ave.
	Miramar, FL 33027		Miramar, FL 33027
	03/15/2018		L18000068478
	Date of filing/registration in Florida	4.	Document number
(a)	Karen Stetson		
. (11)	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	f State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	ZIRZI HAY -1 PH IZ ZIRZI HAY -1 PH IZ THE PARTAGENET FOR THE
	333 SE 2nd Avenue, Suite 3200		
	Miami FL	33131	
	Cogonay Clobal Inc		2 11
(b)	Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address:		
			第 6
	115 North Calhoun Street, Suite	4	
	NEW Registered Office Address:		
			
	Tallahassee	32301	<u></u>
ie cha gent v ras/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the registered of fability company of the limited lia	office and the business office of the registers it is hereby confirmed that the change(s) ability company or as otherwise provided in
		Rafael F	R. Jimenez Dan, Authorized Representative
	ture of a member of authorized representative of a member		Printed or typed name of signed
rovisi he obl o merc	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. If in writing of this change.	ree to act in this r performance of ed for in Chapte, hereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and acce or 605, F.S. Or, if this document is being file that the limited liability company has been
<u></u>	for Ass Haut Scirtury		
Signatu	ack of Registered Agent		