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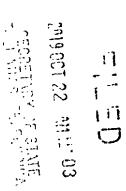
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PICK-UP	☐ WAIT	MAIL	
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## COVER LETTER

TO:	Registration Section Division of Corporations	:	•		
SHRI	B&H Pro Solutions, LLC				
aona;	JBJECT: Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Offi	ce Change an	d fee(s) are submitted for filing.		
Please	return all correspondence concerning thi	s matter to the	e following:		
Rach	el M. Richards				
	Name of Person		<del></del>		
Grub	er and Associates, P.A.				
	Firm/Company	~ <del>~~~</del>	<del></del>		
2400	E Commercial Boulevard Suite 1				
	Address				
Fort l	_auderdale, FL 33308				
	City/State and Zip Code				
rebek	kavpuca@gmail.com				
Ī	E-mail address: (to be used for future ann	ual report not	ification)		
For fu	rther information concerning this matter,	please call:			
Rach	el Richards	954 at (	522-2222		
	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	R D P	AAILING ADDRESS: Legistration Section Division of Corporations LO. Box 6327 Callahassee, Florida 32314		
	Enclosed is a check for the following	amount:			
	☑ \$25 Filing Fee	<b>-</b> :	\$55 Filing Fee & Certified Copy		
INHST	8 (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 Florida.

(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1015 East Sunrise Boulevard #101	10	15 East Sunrise Boulevard #101	
	Fort Lauderdale, FL 33304	Fo	ort Lauderdale, FL 33304	
	07/03/2018		L18000162258	
	Date of filing/registration in Florida	4,	Document number	
(a)	Registered Agent and Registered Office shown on the records			
	Registered Agent and Registered Office shown on the records Hunter M. Shaw	of the Florida Dep		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)		
	470 NORTHEAST 5TH AVENUE #3607		19 Jan 19 19 19 19 19 19 19 19 19 19 19 19 19	
	Fort Lauderdale, FL_33		#1900T 72 MIX 03	
/h.\			19 3.	
(b)	Enter name of NEW Registered Agent and/or NEW Registe	red Office address		
	Rebeka Miranda		7	
	NEW Registered Office Address:			
	1015 East Sunrise Boulevard #101			
		22224		

Rebiba Miranda

Rebeka Miranda

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 office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Robika Miranda