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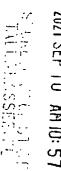
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Special Instructions to	Filing Officer:		
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations		. •
SUBJI	STEREOFIT HOLDINGS LLC		
		Name of Limited	Liability Company
Dear S	Sir or Madam:		
The en	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please	return all correspondence concernin	g this matter to the	e following:
JORGI	E BETANCOURT		
	Name of Person		
STERI	EOFIT HOLDINGS		
	Firm/Company		
8950 S	SW 74TH COURT 2201-G4		
	Address	•	
MIAM	II FL 33156		
	City/State and Zip Cod	de	
JORGI	E.BETANCOURT@GMAIL.COM		
E	-mail address: (to be used for future	annual report noti	fication)
For fur	rther information concerning this ma	tter, please call:	
JORGI	E BETANCOURT	305 at (3184491
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ving amount:	
	■ \$25 Filing Fee	□ :	\$55 Filing Fee & Certified Copy
INHS1	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.

I. Na	ame of the limited liability company: STEREOFIT HO	OLDINGS LL	C		
2 (a)		(b)			
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing addre	ess of limited liability co	mpany:
	8950 SW 74TH COURT STE 2201-G4	8	950 SW 74TH COUF	RT STE 2201-G4	
	MIAMI FL 33156		11AMI FL 33156		_
	08/08/2018	LI	8000190396		
3.	Date of filing/registration in Florida	4.	Document	number	
5 (-X					
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida D	ept. of State:		
	LANDA-POSADA P.A			2021 SEP	
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)		SE SE	\Box
	6080 SW 40 STREET 4				
	MIAMI, F	33155		(7)	H
				AM 10: 5	
(b)				57	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office addro	<u>ss</u> :		93
	JORGE BETANCOURT				
	NEW Registered Office Address:				
	8950 SW 74TH COURT STE 2201-G4				
	MIAMI . F	33156			
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited last authorized by an affirmative vote of the members acles of organization or the operating agreement of the	aws of the St he registered liability comp of the limite e limited liab	office and the busing pany, it is hereby co d liability company	ess office of the reg nfirmed that the cha	istered mge(s)
Signa	ture of a member or authorized representative of a member		 	vped name of signee	··
I here provisi the obl to mero notified	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	e performand led for in Cha	this capacity. I fur te of my duties, and apter 605, F.S. Or,	ther agree to compl I am familiar with a if this document is b	ınd accept eing filed

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00