## L18000 251730

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## **COVER LETTER**

Registration Section

TO:

INHS18 (2/14)

**Division of Corporations** S&G INTERNATIONAL HOLDINGS, LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: JOAN BURTON JENSEN Name of Person SIGURD JENSEN CO. Firm/Company 806 SOUTH DOUGLAS RD., SUITE 580 Address CORAL GABLES, FLORIDA 33134 City/State and Zip Code jbj@jensig.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOAN BURTON JENSEN Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: **\$25** Filing Fee ☐ \$55 Filing Fee & Certified Copy

## 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.

1. 8	Same of the limited liability company: S&G INTERNA	ATIONA	l, I	HOLDINGS LLC
2. (a	)		(b	(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)
	806 SOUTH DOUGLAS ROAD, SUITE 580			806 SOUTH DOUGLAS ROAD, SUITE 580
	CORAL GABLES, FL 33134			CORAL GABLES, FL 33134
	OCTOBER 25, 2018			L18000251730
3.	Date of filing/registration in Florida	<del></del> 4.	•	Document number
5. (a	a TROND JENSEN			
<i>J.</i> ( <i>u</i> )	Registered Agent and Registered Office shown on the records of	of the Flor	rīda	da Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRI	ESS	<u>(SS)</u>
	800 SOUTH DOUGLAS ROAD, SUITE 300, PUERTA	DEL S	OL.	t.
	CORAL GABLES	33134	ı	·
	· · ·	L		~.
(b)	)			<del></del>
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office	ade	iddress:
				$\varkappa$
	ADMID TO LONG AND A			<del>-</del>
	NEW Registered Office Address:			
	806 SOUTH DOUGLAS ROAD, SUITE 580			
	CORAL GABLES F	33134 T.		
chang agent was/v the ar Sign	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the autre of a member or authorized representative of a member aby accept the appointment as registered agent and agricions of all statutes relative to the proper and complete	aws of the registriability of the left imited Telegraphs of the performance of the registration of the left of the registration of the registratio	he ere con imid li RO	e State of Florida, it is hereby confirmed that after the red office and the business office of the registered company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in liability company.  OND JENSEN  Printed or typed name of signce or in this capacity. I further agree to comply with the mance of my duties, and I am familiar with and accept
the ol to me	oligations of my position as registered agent as provide rely reflect a change in the registered office address, I red in writing of this change.	ed för ir hereby	n Ĉ co	Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
Signat	ure of Registered Agent			