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Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

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Account Name : HARVARD BUSINESS SERVICES, INC.  
Account Number : I20080000045  
Phone : (302)645-7400  
Fax Number : (302)645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**LLC REGISTERED AGENT CHANGE  
THIN GOLD INVESTMENTS LLC**

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JAN 10 2022

# 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. Name of the limited liability company: THIN GOLD INVESTMENTS LLC
2. (a) 7901 KINGSPONTE PKWY STE 15 ORLANDO, FL 32819  
(Note: MUST BE STREET ADDRESS)  
 (b) 7901 KINGSPONTE PKWY STE 15 ORLANDO, FL 32819  
(Note: MAY BE POST OFFICE BOX)  
Mailing address of limited liability company
3. 10/29/2018 Date of filing/registration in Florida
4. L18000253715 Document number
5. (a) INTERNATIONAL DIVISION BY LARSON LLC  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
7901 KINGSPONTE PKWY STE 15  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
ORLANDO, FL 32819
- (b) Registered Agents Inc.  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
7901 4th Street N, Ste 300  
NEW Registered Office Address:  
St. Petersburg, FL 33702

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Mateus Dias Massari  
 Signature of a member or authorized representative of a member

MATEUS DIAS MASSARI  
 Printed or typed name of signer

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.

Bee Hume  
 Signature of Registered Agent

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