

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L18000270962

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE

KUKUA INVESTMENT, LLC

Certificate of Status	0
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C. BRUMBLEY

APR 27 2022

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: Kukua Investment, LLC

2. (a) Principal office address of the limited liability company: 8361 W FLAGLER ST

(Note: MUST BE STREET ADDRESS)

MIAMI FL 33144

(b) Mailing address of limited liability company: 8361 W FLAGLER ST

(Note: MAY BE POST OFFICE BOX)

MIAMI FL 33144

11/20/2018

L18000270962

3. Date of filing/registration in Florida

4. Document number

5.(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

MAS CORPORATE SERVICES, LLC

Registered Office Address:

2333 PONCE DE LEON BLVD., SUITE 314

CORAL GABLES FL 33134

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

NEW Registered Agent:

Juan Miguel Mari Llabres

NEW Registered Office Address:

8361 W. FLAGLER STREET

(MUST BE FLORIDA STREET ADDRESS)

Miami FL 33144

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that 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.

Nicholas Nichols
(Signature of a member or authorized representative of a member)

Nicholas Nichols, Attorney-in-Fact

(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.

Nicholas Nichols
(Signature of Registered Agent) **Nicholas Nichols, Attorney-in-Fact**

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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North Palm Beach FL 33408
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