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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. No	ame of the limited liability company: RESOLVE INTE	RNATIC)M/	AL HOLDI	NGS, LLC		
2. (a)	1510 SE 17TH ST	t)	ხ)_	1510 SE 17	TH ST		
,	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	(٠, <u>-</u>	N	lailing address c (<u>Note: MAY B</u>		• •
	STE 400		5	STE 400			
	FORT LAUDERDALE, FL 33316	_	I	ORT LAU	DERDALE, F	L 33316	
	12/20/2018		LI	\$00029010)7		
3. 5. (a)	Date of filing/registration in Florida ANDREA JANSZ	4.			Document nu	mber	
(b) _	Registered Agent and Registered Office shown on the records of 1510 SE 17 STREET	the Florid	la Di	ept. of State:			
	Registered Office Address	(DDRES:	<u>S)</u>	· 			
	FORT LAUDERDALE FL	33316					
	C T Corporation System		_				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Officend	dre	72:			
	NEW Registered Office Address:						
	1200 South Pine Island Road					,	
	Plantation, FL	33324					2023 K. ??
the cha agent w was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi: bility ec f the lim	stei m _i nite	ed office a pany, it is i d liability	and the busin hereby confir company or a	ess office of	d that after the registered change(s) provided in
	See Elis	JOE	D.A	AVIS, MAN	NAGER	>.	£ 3
Signat	ture of a member or authorized representative of a member		_	1	Printed or typed	name of signe	<u> </u>
provisi he obli o mere	by accept the appointment as registered agent and agra ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I h I in writing of this change.	perform l for in (ereby co	iana Cha onfi	this capac ce of my di ipter 605, irm that th	city. I further utles, and I ar F.S. Or, if th we limited liah	rayree to co n familiar w is document vility compa	mply with the 4th and accept 4 is being filed ny has been
3y: Sionann	C.T. Corporation System SEAN L. EMERICK, ASSISTANT SECRETARY TO OF Registered Agent	Charles de	6				
Signatur	re of Registered Agent						

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