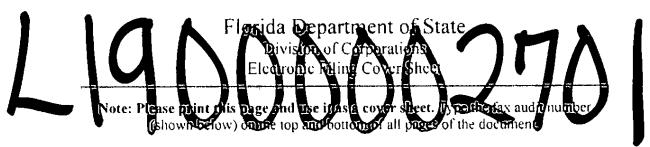
3/31/2021

Division of Corporations



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Fax Number : (954)208-0845

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## LLC REGISTERED AGENT CHANGE HAMMERHEAD GROUP, LLC

Certificate of Status	0
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APR - 1 2021

M. SULUMBIA

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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 submus the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: HAMMERHEAI	) GROUP, LLC	
2. (a)		(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)
	8900 NW 33RD ST STE 100	8900 N	W 33RD ST STE 100
	DORAL, FL 33172	DORAI	FL 33172
	12/27/2018	1.190000	02701
3,	Date of filing/registration in Florida	4.	Document number
5. (a)	MLG SERVICES, LLC		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept of S	State:
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	
	7284 W. Palmetto Park Road Suite 101		2021
	Boca Raton , FI	33433	2021 HAR 3 I
(b)	C T Corporation System		in the contract of the contra
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address	AH 10:
	NEW Registered Office Address;		a
	1200 South Pine Island Road		<u> </u>
	Plantation, F1	33324	
the cha agent v	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered of lability company, of the limited liab	fice and the husiness office of the registered it is hereby confirmed that the change(s) illity company or as otherwise provided in
	16-	Steven Tch	nira - President
_	iture of a member or authorized representative of a member		Printed or typed name of signed
provis the obt to mer notifie By	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.  CT Corporation System  Olga Hinkel - VP	gree to act in this of e performance of i ed for in Chapter hereby confirm th	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed near the limited liability company has been
Signati	ire of Registered Agent		