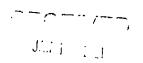
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COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: 1 TIVY S DOCITE AUTO Name of Lim	Propriet LC nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
AMBB POSSICI POLOCIO Name of Person	
Firm/Company	
SET DOLONO AVENUO Address	
Par Bay FI 3000 City/State and Zip Code	<u> </u>
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Name of Person at (2)	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 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

INHS18 (2/14)

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. Na	ame of the limited liability company:	M	oilt (-	- LHO POPCIIC	· LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	<u>P.o.</u>	Mailing address of limited li	•	
	Palm Bay FT 32607	_	<u>Kam</u>	BON, FI 390	100	
3.	Date of filing/registration in Florida	_ لِ	190000	Document number		
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	- 3:		
	Registered Office Address MUST BE FLORIDA STREET A Palm Bay 7 32907 FL		_	- -	2021 JAN 19	: Y
(b)	PANOTIZED MEM Registered Agent and/or NEW Registered	Office add	ress:	·	PH 6:	:11
	HOLO LIPSCOMS ST. NE NEW Registered Office Address: LIOIT (00047)			<u>.</u>	24	
	Palin Bay, FL	3-)9	05_	-		
change agent v was/w the arti	imited liability company is not organized under the law c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered ability corrections of the limited	d office and npany, it is ted liability	d the business office of shereby confirmed that y company or as other ipany.	f the registe at the change wise provid	red c(s)
I here provisi the obt to mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. I had in writing of this change.	ee to act i performa I for in Ci iereby coi	n this capa nce of my c napter 605 nfirm that i	Printed or typed name of sacity. I further agree to duties, and I am familia, F.S. Or, if this docur the limited liability con	o comply w	ith the accept ig filed been

Signature of Registered Agent

Cohe