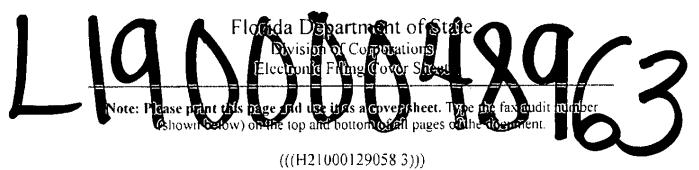
3/31/2021

Division of Corporations





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LLC REGISTERED AGENT CHANGE DECOWRAPS INTERNATIONAL HOLDINGS, LLC

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APR - 1 2021

M. SOLOMON

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

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	me of the limited liability company: DECOWRAPS II	NTERNATION	NAL HOLDINGS, LLC
2. (a)		(b)	
~ (\tag{\tag{\tag{\tag{\tag{\tag{\tag{	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	890	00 NW 33RD ST STE 100
	DORAL, FL 33172	Dr	DRAL, FL 33172
	12/27/2018	1.190	(H)(K)48963
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 Dep	or, of State
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	7284 W. Palmetto Park Road Suite 104		2021 HAR
	Boca Raton, FI	33433	A 30 3
(ს)	C T Corporation System		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		E 19 19 19 19 19 19 19 19 19 19 19 19 19
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation . F1	33324	
signal was in the art Signal I here provis the obtomer	imited liability company is not organized under the la ange or changes are made, the Florida street address of 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 flure of a member of authorized representative of a member thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elly reflect a change in the registered office address. If d in writing of this change. CT Corporation System Oga Hinkel-VP	f the registere in the limited of the limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company. n Tchira - President Printed or typed name of signee this converts: I further correct to comply with the