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2023 SEP -5 PH 4: 09

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	GANG WARILY HOLDINGS ILC		
		e of Limited	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offic	ce Change a	nd fee(s) are submitted for filing.
Please	return all correspondence concerning this	s matter to t	he following:
Michae	el I. Feldman, Esq.		
	Name of Person		
Krinzn	nan Huss Lubetsky Feldman & Hotte		
	Firm/Company		
169 E.	Flagler St., Stc. 500		
	Address		
Miami	, FL 33131		
	City/State and Zip Code		
mif@k	hllaw.com		
E	-mail address: (to be used for future annu	ıal report no	tification)
For fur	ther information concerning this matter.	please call:	
Michae	el I. Feldman, Esq.	305	854-9700
	Name of Person	(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	ت	\$55 Filing Fee & Certified Copy
INHST	8 (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	me of the limited liability company: GANG WARILY	HOLI	OIN	GS LLC				_
2. (a									
(,	• •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of l			
		450 Alton Rd. Apt 2907			450 Alton	Rd, Apt 2907			
		Miami Beach, FL 33139	_		Miami Be	each, FL 33139			
		02/19/2019			L19000049	9422			
3.		Date of filing/registration in Florida	4.	-		Document num	ber		
5. (:	a)								
	-,	Registered Agent and Registered Office shown on the records of	the Flo	nda	Dept. of Sta	te:			
		ALSALOUSSI, MOHAMMED							
		Registered Office Address (MUST BE FLORIDA STREET A							
		4466 Sheridan Ave					Zf.	2023	
		Miami Beach , FL	33140)		_	LAHASSEE	2023 SEP -5	
							ASS ASS	Ç.	1
(b) .	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	Paca.	_	E E	70	IL
		Eller Halle Of Litery September From Blood Control Registree	Ome				<u> </u>	<u></u>	
		RUMMOND, CHRISTOPHER					PH 4: 09 E. FLORID.		
		NEW Registered Office Address:	-	_		0 E 9			
		450 Aiton Rd, Apt 2907							
		Marin J. Fr	22120						
		Miami Beach, FL	33135			_			
changagent was/sthe as Sign I her provisithe of the means of the sign and the sign	ge t w we rtic nali reh isid bli	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member or authorized representative of a member of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the complete of the proper and complete in the registered of the address, I have the change of this change.	regist bility f the l limite	erec con imit d lia	office an apany, it is contact the contact	id the business of is hereby confirm by company or as in pany. Printed or typed no pacity. I further a	fice of the ed that the otherwise	registere change(provideo	ed (s) d in