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Division of Corporations

Florida Department of State

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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.	Na	me of the limited liability company: GARAVENTA LII	et FLC)K	IDA LLU				
2. (a	:)	160 Greentree Dr Suite 101	(i	b)	I'O BOX 740707				
	• ' ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing	nddress of fi MAYBE			
		Dover, DE 19904	_ _		BOYNTON BEA	CH, FL 33-	1 74		
		03/29/2019		1	.19000084432				
 3. 5. (\	Date of filing/registration in Florida Sabra, Douglas	4.		Docur	nent num	ber		
5. (a)	a)	Registered Agent and Registered Office shown on the records of the	ie Florid	a	Dept of State				
		Registered Office Address (MUST BE FLORIDA STREET AD	<u>DDRES</u>	<u>2)</u>					
		BOYNTON BEACH, FL_	33426					2022	
	•)	C T Corporation System						2022 OCT	<u> </u>
	,	Enter name of NEW Registered Agent and/or NEW Registered Offi			res <u>s</u> :			17 AM II:	AKO AKO TLED
		NEW Registered Office Address:						1:-	C
		1200 South Pine Island Road					• • • •	Š	
		Plantation , FL	33324						
the cagen was ²	cha it w	imited liability company is not organized under the law nge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the reg bility o `the lir	isi oi ni	ered office and the npany, it is hereb ted liability comp	ne busines by confirm pany or as	ss office (red that the otherwise	of the he cha	registered ngc(s)
Sig	gnat	ure of a member or authorized representative of a member	-		Printe	l or typed n	ante of sign	lee	
prov the c to m notij By:	usi obl ere fiec	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete registered agent as provided ely reflect a change in the registered affice address. I have time of this change. CT Corporation System To Registered Agent Denise Bell, Assistant Secretary	re 10 ac perforn for in ereby c	er na Co	in this capacity, nce of my duties, hapter 605, F.S. ofirm that the lin	I further a and I am Or, if this itted liahi	agree to e familiar k docume lity comp	comply with a nt is b any he	with the nd accept eing filed is ficen