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COVER LETTER

то:	Registration Section Division of Corporations					
SUBJI	AY Mezeal, LLC ECT:					
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The en	nclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning this m	atter to the following:				
Lynn b	Reardon, Senior Paralegal					
	Name of Person					
Squire	Patton Boggs (US) LLP					
	Firm/Company					
201 E.	Fourth Street, Suite 1900					
	Address					
Cincin	nati, OH 45202					
	City/State and Zip Code	*************************************				
lynn.re	:ardon@squirepb.com					
- I	E-mail address: (to be used for future annual	report notification)				
For fu	rther information concerning this matter, plea	ase call:				
Lynn B	Reardon, Senior Paralegal	513 361-1259 at ()				
	Name of Person	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314				
	Enclosed is a check for the following am	ount:				
	□ \$25 Filing Fee					
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

(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)	
	1395 BRICKELL AVE 14TH FLOOR-JHF		1395 BRICKELL AVE 14TH FLOOR-JHF	
	MIAMI, FL 33131		MIAMI, FL 33131	
	05/31/2019		1.19000139279	
	Date of filing/registration in Florida	4.	Document number	
(a)	Registered Agent and Registered Office shown on the records of FRIEDHOFF, ROBERT H	of the Florid	rida Dept. of State:	
	Registered Office Address <u>MUST BE FLORIDA STREET</u> 1395 BRICKELL AVE 14TH FLOOR-JHF	<u> </u>		
	<u> </u>	··· - ·		1
(b)	1395 BRICKELL AVE 14TH FLOOR-JHF	··· - ·	2022 JUL SEGRETALLA	
(b)	1395 BRICKELL AVE 14TH FLOOR-JHF MIAMI , F	<u>33131</u>	2022 JUL SEGRETALLA	
(b)	1395 BRICKELL AVE 14TH FLOOR-JHF MIAMI , F C T Corporation System	<u>33131</u>	2022 JUL 14 P) SECRETARY OF TALLAHASSE	n
(b)	1395 BRICKELL AVE 14TH FLOOR-JHF MIAMI , F C T Corporation System Enter name of NEW Registered Agent and/or NEW Registered	<u>33131</u>	2022 JUL SEGRETALLA	n

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/Javier Enri	que Flo	res Cortes		Javier Enrique Flores Cortes	
			 :	 	

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

C T Corporation System

/s/Laura R. Broderick, Assistant Secretary

Signature of Registered Agent