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SECRETARY OF STATE

JQ 01/23/20

COVER LETTER®

TO: Registration Section Division of Corporations	•				
MADISON HIGH LLC SUBJECT:					
Na Na	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Of	Tice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning to	nis matter to the following:				
	co				
Nicole Zito					
Name of Person					
Firm/Company					
PO 41 414 9					
Address					
Miami Beach, FL 33141					
City/State and Zip Code					
nikizito@gmail.com					
E-mail add ess: (to be used for future ar	nual report notification)				
For further information concerning this matte	r, please call;				
Nicole M Zito	561 388-4484 at (
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	g 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 CGMPANY

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.

l. Na	ame of the limited liability company: MADISON HIG	H LLC			
2. (a)	2630 W Broward Blvd		(b) P.O. Box -	114119	
<i>2.</i> (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 203-400		Miami Bea	ach, FL 33141	
	Fort Lauderdale, FL 33312				
	August 09, 2019		L190002028	860	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Roniel Redriguez IV				
J. (u)	Registered Agent and Registered Office shown on the records of 12555 Biscayne Blvd	of the Flori	da Dept. of Stat	– e:	
	Registered Office Address (MUST BE FLORIDA STREET) Suite 915	T ADDRE	<u>SS)</u>	_	
	N Miami . F	L 33181		202 SE	
(b)	Nicole M Zito			FILED 2020 JUL 31 AM 10: 54 SECRETARY OF STATE TAILLAHASSEE, FL	
()	Enter name of NEW Registered Agent and/or NEW Registered	ed Office	address:	UL 31 ETARY (
	2444 Prairie Avenue			SEE O	
	NEW Reg.stered Office Address:			TATE FL	
	Miami Beach !	33140		~	
change agent was/w the art	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the register liability is of the E	ne State of Florered office an company, it is inited liabilited.	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.	
_	nure of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, a d in writing of this change.	gree to a le perfor led for ir I hereby	ct in this cap mance of my a Chapter 602 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Signari	are of Registered Agent				