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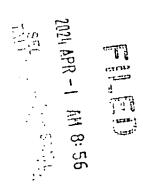
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	HECT: NextLevel Solutions USA, LLC				
	Nai	ne of Limited 1	Liability Company		
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registered Of	fice Change an	d fee(s) are submitted for filing.		
Please	e return all correspondence concerning th	nis matter to the	e following:		
Nikola	y Advolodkin				
	Name of Person				
NextL	evel Solutions USA, LLC				
	Firm/Company				
1111	SW 1st Ave #2814				
	Address				
Miami	, FL 33130	•			
	City/State and Zip Code				
nadvo	lod@gmail.com				
	E-mail address: (to be used for future an	nual report not	ification)		
For fu	orther information concerning this matter	, please call:			
Nikola	y Advolodkin	at (<u>240</u>	7500689		
	Name of Person	\	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:	N	AAILING ADDRESS:		
	Registration Section		Registration Section Division of Corporations		
	Division of Corporations				
	Clifton Building		.O. Box 6327		
	2661 Executive Center Circle Tallahassee, Florida 32301	Т	allahassee, Florida 32314		
	Enclosed is a check for the following	g amount:			
	☐ \$25 Filing Fee	X	\$55 Filing Fee & Certified Copy		

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. N:	nme of the limited liability company: NextLevel Solution	is USA,	LLC	
2. (a)		(b)	
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· - '	<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7901 4th St N STE 300		7901 4th S	St N STE 300
	St. Petersburg FL 33702		St. Peters	burg FL 33702
	07/08/19		L19000206	521
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agents Inc			
J. (a)	Registered Agent and Registered Office shown on the records of t	he Flori	da Dept. of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRES	<u></u> 	2021 APR
	St. Petersburg FL	33702		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Offi</u> Nikolay Advolodkin		ddre <u>ss</u> :	MH 8: 56
	NEW Registered Office Address:			
	1111 SW 1st Ave #2814			_
	Miami , FL	33130	u	_
the charagent was/w the art Signa	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the structure of a member or authorized representative of a member or authorized representative of a member of a proper the appointment as registered agent and agricultures of all statutes relative to the proper and complete.	the regibility of the li limited Nik	distered office company, it mited liability could be liability capacity of the liability of th	the and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in empany. kin Printed or typed name of signee Deacity. I further agree to comply with the duties and I am familiar with and accept
the ob to mer natifie	ligations of my position as registered agent as provided ely reflect a change in the registered office address, I lead in writing of this change. David Roberts - Assistant Se	t for in iereby	Chapter 60 confirm that	5, F.S. Or, if this document is being filed the limited liability company has been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 F1LING FEE: \$25.00

Signature of Registered Agent