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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_

## LLC REGISTERED AGENT CHANGE SV FAMILY INVESTMENTS LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

<del>' PH Kee</del>

JUN 2 7 2007

## 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	ame of the limited liability company: SV Famil	ly Investme	ents LLC	
2. (a)	460 NE 28TH STREET	<sub>(b)</sub> 460 N	IE 28TH STREET	
2. (6)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	UNIT 3503	UNIT	3503	
	MIAMI, FL 33137	MIAMI,	FL 33137	
	08/14/19	L19000	0206670	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	VED. DIVYANG			
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	ate:	
	460 NE 28TH STREET			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	UNIT 3503			
	MIAMI . FI.	33137		
(b)	Registered Agents Inc.		2020 JUN 26	
(0)				
	7901 4th St N		25 PM	
	NEW Registered Office Address:			
	STE 300		- 5	
	St. Petersburg, FL	33702	_	
the ch agent was/w	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 livere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	f the registered offi ability company, it of the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
Signa	nure of a member or authorized representative of a member	<u></u>	Printed or typed name of signee	
provis the ob to mer notifie	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provide selv reflect a change in the registered office address. I writing of this change.  Bill Havre - Assistan are of Registered Agent	ree to act in this ca performance of m d for in Chapter 60 hereby confirm tha nt Secretary	pacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been	