

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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From:			:
	Account Name : REGISTERED		• •
	Account Number : I2009000008 Phone : (307)200-28		, : ·
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Electronic Filing Menu

Corporate Filing Menu

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Miami Beach FL 33139	
300 Alton Rd Miami Beach FL 33139 office address on our records	
re:	
Enter Florida street addres	K.Y
FI	orida
Cuy	Zip Code
	300 Alton Rd Miami Beach FL 33139 300 Alton Rd Miami Beach FL 33139 office address on our record are: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>AP</u>	William T Schill	1521 ALTON RD	Add
		MIAMI BEACH, FL 33139	☑ Remove
			Change
<u>AMBR</u>	April Phillips	300 Alton Rd	Ø Add
		MIAMI BEACH, FL 33139	☐ Remove
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Note: If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date with not be	listed as
ne record specifies a delayed effective date, but not an effective. The 90th day after the record is filed.	time, at 12:01 a.m. on the ea	irlier of
February 28 2020		
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