L19000234834

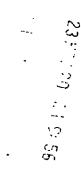
(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
J. HORNE					
DEC 1 1 2023					

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COVER LETTER

TO: Registration Section

Divi	sion of Corporations					
CUBITOT.	DYNO DISTRIBUTION LLC					
SUBJECT:	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	I Registered Agent/Registered Office C	hange ar	nd fee(s) are submitted for filing.			
Please return	all correspondence concerning this ma	tter to th	e following:			
Kenneth Dam	nas					
	Name of Person					
Damas Law						
	Firm/Company					
300 Sevilla A	ive, Suite 306					
	Address					
Coral Gables	, Florida 33134					
	City/State and Zip Code					
ken@damasla	aw.com					
E-mail	address: (to be used for future annual re	eport not	ification)			
For further in	nformation concerning this matter, pleas	se call:				
Kenneth Dan		305	460-1119			
	Name of Person		Area Code & Daytime Telephone Number			
Reg Divi P.O.	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Encl	losed is a check for the following amo	unt:				
€ \$2	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 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. Na	ame of the limited liability company: DYNO DISTRIBU	TION	LLC	
2. (a)		i	(b)	
	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)
	12441 SW 130 Street		12441 SW	130 Street
	Miami, FL 33186	_	Miami, FI	. 33186
	09/17/2019		L19000234	834
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LAW OFFICES OF ADORNO-CUNILL & DAMAS, PL			
u. ()	Registered Agent and Registered Office shown on the records of the 1000 Brickell Avenue Registered Office Address			- e: -
	Suite 720	7171.	<u>557</u>	
	Miami , FL	33131	•	- , , , , ,
				- <u> </u>
(b)	Kenneth Damas, Esq. Enter name of NEW Registered Agent and/or NEW Registered C) (C	.4.4	
	trater name of NEW Registered Agent and/or NEW Registered C	otnee a	iduress:	ر.
	300 Sevilla Ave			
	NEW Registered Office Address:			- 'ô
	Suite 306			. దొ -
	Coral Gables , FL	33134		_
change agent v was/w	imited liability company is not organized under the laws or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited habere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liable.	s of the cgiste oility of the limited	red office an company, it is mited liabilit liability con	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.
<u> </u>	les de	Al	exis K. De Me	
l here provis the ob to mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and agresions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I have my thin writing of this change.	e to ac erforn for in rreby c	ct in this cap nance of my Chapter 605 confirm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signan	ire of Registered Agent			
	Division of Corporations P.O. Be	ox 63	27∙ Tallaha	ssee, FL 32314

FILING FEE: \$25.00