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Name:	Tropic Oil Compa	ny LLC		
Document #:				
Order #:	14898973			
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Thank you!

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: TROPIC OIL CO	MPANY LLC					
2. (a)	10002 NW 89TH AVE.	(b) 100	(b) 10002 NW 89TH AVE.				
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,,,		niling address (Note: MAY)		_	
	MIAMI, FL 33178	<u>ML</u>	AMI, FL	33178		_	
	09/26/2019	1.190	00023718	6			
3.	Date of filing/registration in Florida	- 4.	11	Document n	umber		
5. (a)	RUSH, BRYAN, ESQ.						
2. (4)	Registered Agent and Registered Office shown on the records of	the Florida Dept	, of State:				
	2 S. BISCAYNE BLVD., STE. 2600						
	Registered Office Address (MUST BE FLORIDA STREET).	(DDRESS)					
						2(
	MIAMI , FL	33131				2023 APR	
/L\	C T Corporation System					PR 24	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:					
						AH 5:	أرا
		=	.			Ģ.	
	NEW Registered Office Address:				í	٤	
	1200 South Pine Island Road						
	Plantation . FL	33324					
						(* 1.	.1
the cha	imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited his ere authorized by an affirmative vote of the members of mization or the operating agreement of the	the registered ability compa- of the limited l limited liabili	d office a ny, it is l liability (ity comp	and the busi acreby conf company or	iness off irmed th	ice of that the c	ne registered hange(s)
	18 (2) Odas/1030/42A ture of a member or authorized representative of a member	Tariq Ren		rinted or type	d name of	sionee	
There provis the ob- to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do in writing of this change.	ee to act in the performance of for in Chapt hereby confirmands	iis capac of my di ter 605, m that th	rity. I furth uties, and I i F.S. Or, if i e limited lid	er avree	to com	ply with the n and accept s being filed has been

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