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(Ad	dress)				
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COVER LETTER

Registration Section

TO:

Divi	sion of Co	rporations				
SUBJECT:	MSQ	Capital	LIC			
			Narr	e of Limi	ted Lia	ability Company
Dear Sir or N	Madam:					
The enclosed	d Registere	ed Agent/R	egistered Off	ice Chang	e and f	fee(s) are submitted for filing.
Please return	all corres	pondence (concerning th	is matter t	o the fo	following:
		•	J			
Anna N	40chtan	ova				_
		Name of	Person			
MSQ CA	pital L	لد				
		Firm/Cor	npany			
17885	COLLIND	Avenue	#4002			
		Addres	s			
sunny			100ida 33	1160		_
	Ci	ty/State an	d Zip Code			
٠ و			·			
E-mail	address: (to be used	nail.com for future and	ual report	notific	cation)
						,
For further is	nformation	i concernir	ig this matter,	, please ca	II:	
Anna M				at (<u>91</u>	7	_,
	Name	of Person				Area Code & Daytime Telephone Number
STR	REET/CO	URIER AI	DDRESS:		MA	AILING ADDRESS:
	istration S		Registration Section			
		rporations	Division of Corporations P.O. Box 6327			
	ton Buildir	ig e Center C	ieals			lahassee, Florida 32314
		lorida 3230			1 411	ianassee, monda 32314
Enc	losed is a	check for	the following	; amount:		
Dar's	25 Filing F	⁷ ee			□ \$54	5 Filing Fee & Certified Copy
•		_				
INHS18 (2/14	41					

' 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.

2. (a)	MCO Capital LIC	(b) <u>MSQ</u> (apital U.C
(-,	Principal office address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
, d _	7885 Collins Avenue # 4002	17885 COLLINS AVENUE #4002
	Swiny ISKS Beach, Florida 33160	Sunny Isrs Beach, Florida 33160
<u> ト</u> _	september 23,2019	119000239080
3.	Date of filing/registration in Florida	4. Document number
5. (a)	Anna Mochkaroka	
	gistered Agent and Registered Office shown on the records	of the Florida Dept. of State:
	MSQ Capital LLC)
	egistered Office Address (MUST BE FLORIDA STREET	ET ADDRESS)
) old
_	17875 colling Avenue #4701	
_	Sunny Isles Beach	FL 33\60) AFE TO THE PROPERTY OF THE PROPERTY
(b) 4	Arma Machicarova	
	ter name of NEW Registered Agent and/or NEW Registe	red Office address:
		The second secon
	450 capital LLC	
	EW Registered Office Address:	new for : 00 ?: 55
	17885 colling Avenue #4002	I) word address of LLC
	•	11000
	Sunny Isks Boach.	FL 33160 3) street address of register
ne change gent will vas/were a	or changes are made, the Florida street address be identical. Or, in the case of a Florida limited	laws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) is of the limited liability company or as otherwise provided in the limited liability company.
(`		Anna Mahkarova Managing member
Signature	of a member or authorized representative of a member	Printed or typed name of signee
l hereby a provisions he obligat	accept the appointment as registered agent and confidence of all statutes relative to the proper and completions of my position as registered agent as proving the confidence of the confidence	agree to act in this capacity. I further agree to comply with the ele performance of my duties, and I am familiar with and accept ided for in Chapter 605, F.S. Or, if this document is being filed. I hereby confirm that the limited liability company has been