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.

(((H20000103573 3)))



H200001035733ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.			
To:	Division of Corporations Fax Number : (850)617-6383	-)A # D D .

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

From:

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

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

LLC REGISTERED AGENT CHANGE CEREBRO VENTURES LLC

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

Electronic Filing Menu Corporate Filing Menu

Help O SIMMONS

APR 0 8 2020

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

	2880W OAKLAND PARK BI	W OAKLAND PARK BLVD Cerebro Ventures LLC (b) 2880W OAKLAND PARK BLVD)
(a)	Principal office address of limited liabil (Note: MUST BE STREET ADI	ny company:	_ (0)		failing address	of limited liab	ility compa	ıny:
	SUITE 225C		_	SUITE 2	225C			
	OAKLAND PARK, FL 3331	1	_	OAKLAN	ID PARK, I	FL 33311		
	11/06/19		I	_190002	77637			
	Date of filing/registration in F	lorida	4.		Document n	umber		
(a)	CORPORATIONS SERVICES &	REGISTER	ED AG	ENTS				
(11)	Registered Agent and Registered Office shown	on the records of t	he Florida	Dept. of State	:			
	2398 COMMERCIAL WAY							
	Registered Office Address (MUST BE FLC	DRIDA STREET A	DDRESS.	 ;		11	2020 APR	
	SUITE 224					<u> </u>) AF	
						•	U	
	SPRING HILL	, FL	34606				7 - Ac	
(h)	SPRING HILL Northwest Registered		_	-		·	-7	.
(b)		l Agent L	LC	<u> </u>			-7 AMH:	• • •
(b)	Northwest Registered	l Agent L	LC	<u> </u>		·	-7	• •- •
(b)	Northwest Registered Enter name of NEW Registered Agent and/or	l Agent L	LC	<u> </u>		·	-7 AMH:	₹.
(b)	Northwest Registered Enter name of NEW Registered Agent and/or 7901 4th St N	l Agent L	LC	<u> </u>		, I	-7 AMH:	÷.

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.

Chapter Glover - Assistant Secretary

Morgan Noble

Printed or typed name of signee

Signature of 9 member or authorized representative of a member

Signature of Registered Agent