L20000075796

(Req	uestor's Name)						
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2022 OCT 26 AM 9: 26 SEUME NAMES SEE, FU

2022 OCT 26 AH II: 30

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 077450 8356043									
AUTHORIZATION :									
COST LIMIT : (\$\frac{25.00}{25.00}									
ORDER DATE : October 25, 2022									
ORDER TIME : 9:12 AM									
ORDER NO. : 077450-005									
CUSTOMER NO: 8356043									
CHANGE OF AGENT									
NAME: ICAM USA, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Alexxis Weiland EXT#									
EXAMINER:									

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	Jame of the limited liability company:ICAM USA, LL	С						
2. (a)	8950 SW 74 CT	((b)	8950 SW 7	74 CT			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	'	(0)	M	ailing address (Note: MAY		-	
	STE 1606			STE 1606				
	MIAMI, FL 33156		-	MIAMI, FL	33156			
	12/19/2019		L	200000757	96			
3.	Date of filing/registration in Florida	4.	_	Е	ocument nu	umber		
5. (a	PIEDRA REGISTERED AGENTS, LLC							
J. (u	Registered Agent and Registered Office shown on the records o 8950 SW 74 CT	f the Florid	la E	Dept. of State:		TAT SECTO	2022 OCT 26	-77
	Registered Office Address (MUST BE FLORIDA STREET) STE 1606	ADDRESS)				LAHASSI		
	MIAMI	33156				တ်င ကား ကာ <i>ပ</i>	AH 9: 26	
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:	o (mee a)	uur	<u></u>				
	1201 Hays Street							
	Tallahassee, FI	32301						
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited literer authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	register ability co of the lin	ed om nito	office and t pany, it is h ed liability o	the business ereby confi company or	office of the	ne regis he chan	tered ge(s)
	rgaret Schmitt	Ma	rga	ret Schmitt	, Authorized	d Person		
	ature of a member or authorized representative of a member				rinted or typeo	-		
Signati	thy accept the appointment as registered agent and aging of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I do writing of this change.				ity. I furthe, ties, and I a F.S. Or, if the Ilimited lian	r agree to c m familiar his documer bility compo	comply with an art is being any has	with the d accept ing filed been
Grace	E. Kirby, Asst. Vice President on behalf of Corporation	ion Servi	ice	Company				

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00