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Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
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COVER LETTER

TO:	Amendment Section Division of Corporations	. v	e 440 , 440 ,560 	gent *	
			•	•••	
SUBJI Name	ECT: TINTIN MULTISER of Corporation	VICES L	LC		
DOCU	MENT NUMBER: L 200000777	14			
The en	closed Statement of Change of Registered Office/	Agent and fee are	submitted for fil	ing.	
Please	return all correspondence concerning this matter t	o the following:			
Name	OLIO CESAR CASTRO ATEN	<u>CIO</u>		÷	
Firm/C	Julis Cexar Casto As			20 20) - -
	277 MARITIME FLAG WINDERM	ERE, SUITE	1320	20 JUL 16	ス 三 三
City/S	RLANDO, FL, 34786 ate and Zip Code				: 子 子
E-mai	juliocesarcastroate l address: (to be used for future annual report	notification)	1. com	AMII: 12	- A
For fu	ther information concerning this matter, please ca	11:			
	Julio Cesar Castro	at (407)	266 324	46	
	Name of Contact Person	at (<u>107</u>) Area Code &	Daytime Teleph	ione Number	

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations**

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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:TINTIN MU	LTISERVICES LLC	
2. (a)	8277 MARITIME FLAG	(b)	
()	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 1320		
	WINDERMERE, FL 34786		
	03/10/2020	L2000	00077714
3.	Date of filing/registration in Florida	4.	Document number
5. (a))		
J. (a)	Registered Agent and Registered Office shown on the record	ds of the Florida Dept.	of State:
	7803 WESTMINSTER ABBEY BLVD		<u></u>
	Registered Office Address (MUST BE FLORIDA STRE		
	ORLANDO	32835-5955	<u> </u>
		, FL	
(b)			OF STATE
(0)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office address:	
	8277 MARITIME FLAG		
	NEW Registered Office Address:		
	SUITE 1320		
	WINDERMERE	, FL 34786	
change agent was/w	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite tere authorized by an affirmative vote of the membericles of organization or the operating agreement of	f the registered offi ed liability compan ers of the limited li the limited liabilit	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
	Signature of an officer or director	<u> </u>	CESAR CASTRO ATENCIO / DIRECTOR
provis the ob to mer	tby accept the appolitiment as registered agent and ions of all statutes relative to the proper and comp ligations of my position as registered agent as provely reflect a change in the registered office addressed in writing of this change.	l agree to act in thi lete performance o vided for in Chapte s, I hereby confirm	s capacity. I further agree to comply with the of my duties, and I am Jamiliar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been

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

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