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Division of Corporations

## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400

Fax Number : (302)645-1280

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

support@registeredagentsinc.com Email Address:

## LLC REGISTERED AGENT CHANGE CEDARS BUSINESS VENTURE LLC

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## 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. Cedars Business Venture LLC 1. Name of the limited liability company: 7901 4th Street N, Ste 300, St. Petesburg, 33702 (b) Ruta 8 KM 17.500 office 120 A, Montevideo, Principal office address of limited liability company: Uruquay (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 03/18/2020 L20000085252 3. Date of filing/registration in Florida Document number BP Tax Advisory LLC 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept, of State: 848 BRICKELL AVENUE Registered Office Address (MUST BE FLORIDA STREET ADDRESS) **STE 203** Miani Registered Agents Inc. Eater name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th Street N. Ste 300 NEW Registered Office Address: FL 33702 St. Petersburg If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Ludes Add de Fordes Carlos Adel de Freitas Signature of a member or authorized representative of a member Printed or typed name of signee 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.

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

Johld Kladoeris

Signature of Registered-Agent