L20000163040

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(DUSTITESS ETTING WATTE)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 915488 8387298							
AUTHORIZATION : Spelle cleman							
COST LIMIT : \$ 25'.00							
ORDER DATE : August 30, 2022							
ORDER TIME : 2:47 PM							
ORDER NO. : 915488-001							
CUSTOMER NO: 8387298							
CHANGE OF AGENT							
NAME: THREE BOUDOIR LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

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.

۱.	Na	me of the limited liability company:	OOIR LL	С		
7	(a)	1150 NW 72ND AVE TOWER I STE 455 #1612		(b)	1150 NW 72ND AVE TOWER I STE 455 #1612	_
-	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(11)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_
		MIAMI, FL 33126			MIAMI, FL 33126	_
		06/12/2020		L	L20000163040	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	LEGALINC CORPORATE SERVICES INC.				
	()	Registered Agent and Registered Office shown on the records of	of the Flor	ida I	a Dept. of State:	
		5237 SUMMERLIN COMMONS SUITE 400				
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRE	<u>(SS)</u>	<u></u>	
					2	
		FORT MYERS I	33907	7	2022 AUG 31 TALLAH	
					ω	
	(b)					
		Enter name of NEW Registered Agent and/or NEW Register	ed Office	<u>addı</u>	Idress:	
		Corporation Service Company			Idress:	
	NEW Registered Office Address:				m o	
		1201 Hays Street				
		Tallahassee F	FL32301	l 		
cha age wa	ange ent w s/we	mited liability company is not organized under the lor changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registe liability of s of the li	ered com imit	ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in	e
/s	/ Am	ber McCue	A	mbe	ber McCue, Authorized Person	
S	ignat	ure of a member or authorized representative of a member	_	•	Printed or typed name of signee	_
pro the to	ovisie obli mere	oy accept the appointment as registered agent and as ins of all statutes relative to the proper and complet gations of my position as registered agent as provid by reflect a change in the registered office address. I in writing of this change.	gree to a e perfori led for in I hereby	ct in man i Ch con	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accep Thapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been	1
높		ore CTVDL e of Registered Agent	G	RA	ACE E. KIRBY, ASST. VICE PRESIDENT	
را ت	LIALUI	e or ivekisteren when /				