L20000172310

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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 567585 8321564

AUTHORIZATION : C

COST LIMIT : \$ 35.00

ORDER DATE: March 23, 2022

ORDER TIME : 4:42 PM

ORDER NO. : 567585-004

CUSTOMER NO: 8321564

CHANGE OF AGENT

NAME: BIZ BROKERS INTERNATIONAL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- 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.	BIZ BROKERS INTERNATIONAL, LLC Name of the limited liability company:								
2. ((a)	1714 NW 215th Street	((b)	1714 NW	215th Street			
,	/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	(**)		Mailing address of (Note: MAY BE			•
		Miami Gardens, FL 33056			Miami Gar	rdens, FL 33056	6		
		06/25/2020	_		L20000172	2310		-	
3.		Date of tiling/registration in Florida	4.	_		Document num	ıber		
(b)	CORPORATE CREATIONS NETWORK INC. Registered Office Address (MUST BE FLORIDA STREET ADDRESS 801 US HIGHWAY 1 NORTH PALM BEACH . FL 33 Enter name of NEW Registered Agent and/or NEW Registered Office Corporation Service Company NEW Registered Office Address:				·	SECTION WAY OF STATE		
1201 Hays Street									
		Tallahassee, FL_	32301						
char ager was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	register bility co f the lir imited	rec on nit lia	l office and ipany, it is ed liability ibility com	I the business of hereby confirm company or as pany.	ffice of the ned that the	egiste chang	ered c(s)
Signature of a member or authorized representative of a member					Jill Cilmi, Authorized Person Printed or typed name of signee				
I he prov the to n noti	ereb visio obli iere fied	we accept the appointment as registered agent and agreems of all statutes relative to the proper and complete patients of my position as registered agent as provided by reflect a change in the registered office address. I have in writing of this change.	perform for in e ereby c	iar Cl :or	n this capa ace of my d aupter 605, afirm that th	eite I forthør i	agree to con familiar wi s document i lity compan	,,,,l1: 1 <i>c</i>	ith the laccept ig filed been