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July 20, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HAMSA HOUSE LLC 13302 CASPIAN LANE CLERMONT, FL 34711US

SUBJECT: HAMSA HOUSE LLC

REF: L20000179273

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H20000225757 Letter Number: 420A00013607

## 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.

l. Na	me of the limited liability company: HAMSA HOUSE L	LC_						
			o)					
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	• `	Ŋ	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	13302 CASPIAN LANE CLERMONT, FL 34711	-						
	06/26/2020	_	L200001792					
3. 5. (a)	Date of filing/registration in Florida OSVALDO VASQUEZ	4.		Document number				
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	Registered Office Address (MUST BE FLORIDA STREET AL 13302 CASPIAN LANE	<u></u>	2020 -					
	CLERMONT, FL_	34711		<del>.</del> .				
(b)	C T Corporation System  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>		M) 9: 1.6					
	NEW Registered Office Address:							
	1200 South Pine Island Road							
	Plantation, FL_	33324						
the changent was/w the art Noa Signa	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lial cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the Digitally signed by Noah Vasquez Date: 2020.07.14 13:17:07-04'00' liture of a member or authorized representative of a member	the reg bility c f the lii limited No	istered office ompany, it is nited liability liability con ah Vasquez-A	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.  uthorized Representative  Printed or typed name of signee				
provis the ob to mer	hy accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided when the properties of the second agent as provided with the control of this change. CT Corporation System	ee to ac perfori I for in ereby (	ct in this cap nance of my Chapter 60, confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been				
	ure of Registered Agent Christine Kelm-Asst.	Seç	retary					

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