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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer							
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INHS18 (2/14)

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. Na	ame of the limited liability company:we_	FIX	anz	clea	un L	يارر		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing	Additing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Mani Er 33 138			Ma	<u>~~!</u>	FL	<u>``</u> \$	<u> 8<11</u>
1	09/02/2020				0077		<u>ی</u>	
3.5. (a)					ment num	iber		
	Registered Agent and Registered Office shown on the record 100 TSYICKEN DOY DY Registered Office Address (MUST BE FLORIDA STRE		·	of State:			21	• 7.
	Miami Miami		37131				2023 JUN 29	FIL FCRETAR) FC
(b)	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Michael NEW Registered Office Address:				4M 11: 49	COP STATE CREDICATION		
	Mami	, FL	3313	8				
agent was/w	imited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the membericles of organization of the operating agreement of	the regis d liability ers of the	stered office of company limited list ed liability	ce and the by, it is herely ability comy company.	ousiness o by confirm pany or as	ffice of the ned that the s otherwis	he regi he cha se prov	stered nge(s) vided in
Signa	tute of a member or authorized representative of a member	-	3	Printe	d or typed r	name of sign	nee	
provisi the obi to mer notifie	hy accept the appointment as registered agent and tons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of less change.	agree to lete perfo ided for s, I hereb	act in this rmance o in Chapte y confirm	capacity. f my duties, r 605, F.S that the lin	I further o and I am Or, if this nited liabi	agree to c Jamiliar s docume lity comp	comply with a nt is be any he	with the nd accept eing filed is been
guait	Nine: 56	0 B ('33 8 . '8' '					