## 120000305063

(Requestor's Name)					
(Address)					
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(Cit	y/State/Zip/Phon	e #)			
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(Document Number)					
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CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: I2000000	0195	
	REFERENCE	: 377047	8257429	
	AUTHORIZATION	: Spelle	leman	
	COST LIMIT	: \$ 25.00		
ORDER DATE :	January 13, 2022		<b></b>	. <b></b> .
ORDER TIME :	10:24 AM			
ORDER NO. :	377047-035			
CUSTOMER NO:	8257429			
				<b></b>
	CHANGE OF AC	GENT		
NY 70 N 6 7 7 1				
NAME:	FI PAM CC LLC			
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FIR	LING:	
	FIED COPY STAMPED COPY			

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- 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.

1.	Na	me of the limited liability company: FI PAM CC LLC				
2. (	a)	2 South Biscayne Boulevard		 (b)	2 South Bis	scayne Boulevard
•		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Suite 200	_ '	(0)	М	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Miami, FL 33131	_		Miami, FL 3	33131
		10/06/2020		L	_200003050	063
<ol> <li>3.</li> <li>5.</li> </ol>	(a)	Date of filing/registration in Florida  Didier Choukroun	4.	_	D	Document number
•	()	Registered Agent and Registered Office shown on the records of the 2 South Biscayne Boulevard	ie Florie	da I	Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET AD Suite 200	DDRES	<u>55)</u>		
		Miami, FL_	33131	_		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office  Corporation Service Company				ıdd	ress:	
		NEW Registered Office Address: 1201 Hays Street				P D
		Tallahassee, FL	32301			2: 02 E.F.L.
ager was	it w /we	or changes are made, the Florida street address of the rivill be identical. Or in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable of a member of authorized representative of a member	egiste oility c the lii imited	red on mit His	office and npany, it is had liability ability comper Choukrour	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
I he province to motif	rek risio pbli ere fied	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address, I have writing of this change.  The of Registered Agent	e to ac erforn for in ereby c	et i nar Cr con		Printed or typed name of signee city. I further agree to comply with the cities, and I am familiar with and accept F.S. Or, if this document is being filed are limited liability company has been