Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE 10X WHIRLYBIRD, LLC

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Electronic Filing Menu Corporate Filing Menu

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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	ame of the limited liability company: 10X WHIRLY	BIRD, LLC			
2. (a)	18909 NE 29TH AVE	(b) 1	(b) 18909 NE 29TH AVE		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited lie (Note: MAY BE POST O		
	AVENTURA, FL 33180-2807	A	VENTURA, FL 33180-2807	_ -	
	11/23/2020	L.2	0000360241		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	CARDONE, GRANT				
	Registered Agent and Registered Office shown on the records		ept, of State:		
	Registered Office Address (MUST BE FLORIDA STREE 18909 NE 29TH AVE	<u>ET ADDRESS)</u>	·	2021 AUG	ISIAIF JJC
	AVENTURA	FL 33180-2807	,	AUG	- 25 - 25 - 25
(b)	Corporate Creations Network Inc.	-		23	ARY OF
	Enter name of NEW Registered Agent and/or NEW Register	red Office addre	<u></u> <u></u>	AM 10: 17	Y OF STATE ORPORATION
	NEW Registered Office Address:				
	801 US Highway 1				
	North Palm Beach	FL_33408			
change agent v was/w	imited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member injects of organization or the operating agreement of the second control of the control of the second control of the seco	the registered I liability comp is of the limite	office and the business office of pany, it is hereby confirmed that id liability company or as otherw	the regist	erea ze(s)
			Sean Arno, Attorney-in-Fact		
I here provisi the obi to mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	ete performane ided för in Cho	re of my auties, and 1 am jamula inter 605. F.SOr. if this docum	comply were with and entitle the internal is a second	u accept ng filed
	Sean Amo, Special Secretary				
21Fugit	ne or Registered Agent				