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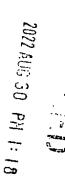
(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
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(Business Entity Name)							
(Document Number)							
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COVER LETTER

TO: Registration Section Division of Corporations	•				
HERMANOS PARTNERSHIP LLC SUBJECT:					
	ed Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to	the following:				
Walter Sowa, III, Esq					
Name of Person					
The Law Office of Walter Sowa ,III, Esq. Pl.					
Firm/Company					
435 12th Street West, Suite 206					
Address					
Bradenton, FL 34205					
City/State and Zip Code					
walter@sowalegal.com					
E-mail address: (to be used for future annual report	notification)				
For further information concerning this matter, please call	l:				
Walter Sowa, III 941 at (840-0820				
Name of Person	Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amount:					
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

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. N	ame of the limited liability company: HERMANOS PA	ARTNER	RSH	IIP LLC		<u>_</u>		
2. (a)	6008 15th Street East		(b) 6008 15th Street East					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-,		Mailing address of l (Note: MAY BE			
	Bradenton, FL 34203			Bradenton,	FL 34203			<u>.</u>
					<u> </u>			
	12/31/2020		_l	L210000103		_		
3.	Date of filing/registration in Florida	4.			Document num	ber		
5. (a)	Fathi Asfoor	·- <u></u>			_			
	Registered Agent and Registered Office shown on the records o	f the Flori	da L	Dept. of State	::			
	2523 Regal River Road			<u> </u>	_			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>SS)</u>				2	
					_)22	
	Valrico	33596				,	2022 AHG	, _
	, F	L			-		<u>အ</u> 0	
(b)	Walter Sowa, III. Esq.				_	:	PH	្វី ដូ
• /	Enter name of NEW Registered Agent and/or NEW Registered Office address:						-	
	The Law Office of Walter Sowa, III. Esq. PL					٠.	: B	
	NEW Registered Office Address:			••	•			
	435 12th Street West, Suite 206				_			
	Bradenton	34205						
					- 			<i>c</i>
If the	limited liability company is not organized under the la e or changes are made, the Florida street address of th	iws of the e registe	ie S ered	State of Flo I office and	orida, it is hereby I the business o	y confi ffice of	rmed tha `the regi	t after the stered
agent	will be identical. Or, in the case of a Florida limited l	iability of	con	ipany, it is	hereby confirm	ied that	the cha	ngc(s)
was/w tho- art	ere authorized by an affirmative vote of the members fieles of frequentiation or the operating agreement of the	e limited	l lia	ibility com	inany.	2		raca iii
				4/w	Printed or typed n	of.		
Sign	ature of a member or authorized representative of a member			/	Printed or typed n	ame of s	ignec	
provis the ob to mer	why accept the appointment as registered agent and ag tions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. It is writing of this change.	ree to a e perfori ed for in hereby	ct ii nar Ch con	n this capa ice of my a iapter 605, ifirm that t	icity. I further of luties, and I am , F.S. Or, if this he limited liabi	igree ta familia docum lity com	o comply ir with a nent is be upany ha	with the nd accept eing filed s been
Signati	ur of Registered Agent							