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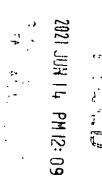
	(Requestor's Name)			
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JUN 30 2021 ! ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations			
Vicana Connection LLC SUBJECT:			
	f Limited Liab	oility Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	Change and fo	ets) are submitted for filing	
	-	· ·	
Please return all correspondence concerning this m	after to the for	iowing:	
Anastasiia Iltimirova			
Name of Person		-	
Vicana Connection LLC			
Firm/Company			
55 NE 5TH ST, UNIT 2611			
Address	 	-	
MIAMI, FL.33132		_	
City/State and Zip Code			
iaa7k88@ mail.ru			
E-mail address: (to be used for future annual	report notifica	tion)	
For further information concerning this matter, plea	ase call;		
Anastasiia Iltimirova	- 609 a. (357-6331	
Name of Person		Area Code & Daytime Telephone Numbe	г
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following am-	ount:	Filing Fee & Certified Copy RFC	15
□ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy	1XI
INHS18 (2/14))/ K'	W 1 7 1

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.

Name of the limited liability company: Vican	a Connection LLC			
3) 55 NE 5th ST, Unit #2611, Miami, Florida, 33	132 (b)	(b) P.O Box 451206, Miami, Florida, 33245		
Principal office address of limited liability c (Nate: MUST BE STREET ADDRE	ompany.	Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)		
01/11/2021	1.2	21000026695		
Date of filling/registration in Florid	da 4.	Document number		
a) Anastasiia Iltimirova				
Registered Agent and Registered Office shown on the	ne records of the Florida D	·		
Registered Office Address (MUST BE FLORIE) 9069 SW 35th ST,	DA STREET ADDRESS)	2021 JUN 14 PM 12: 09		
Miramar	, FL_33025			
Anastasiia Iltimirova				
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office addre	<u></u> 99		
NEW Registered Office Address				
55 NE 5th ST, Utit# 2611				
Miami	, FL ³³¹³²			
ge or changes are made, the Florida street add t will be identical. Or, in the case of a Florida	nder the laws of the St lress of the registered a limited liability com members of the limite ment of the limited liab	ate of Florida, it is hereby confirmed that after the office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in oility company.		
enature of a membed of authorized representative of a me	ember	Printed or typed name of signee		
reby accept the appointment as registered ago isions of all statutes relative to the proper and obligations of my position as registered agent erely reflect a Shango in the registered office of fied in writing of this thange.	ent and agree to act in I complete performanc as provided for in Cha address, I hereby conf	this capacity. I further agree to comply with the ve of my duties, and I am familiar with and accept opter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
ature of Regifiered Audut				