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Florida Department of State

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To:

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

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC REGISTERED AGENT CHANGE KOREPLUS, LLC

Certificate of Status	0
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C. BRUMBLEY

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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.

1. N	ame of the limited liability company: KOREPLUS.1.L	.C						
2 (a)			(b)					
2. (4,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)					
	440 ROYAL PALM WAY		354 Eisenhower Parkway, Plaza 1					
	PALM BEACH, FL 33480		Livington, NJ 07039					
	02/01/2021		L2	!1000031	1589			
3.	Date of filing/registration in Florida	- 4.			Document n	umber	<u></u>	
E ()								
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	ida De	ept. of Sta	 iic:			
	Corporate Creations Network, Inc.			,	,			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	(32.					
	11380 PROSPERITY FARMS ROAD #221E					202 විසි T		
	PALM BEACH GARDENS FI	33410	ı		_	CREINRY OF SI	2022 DEC -7	11
		- <u></u>			_	S 5	1	
(b)						SS.		m
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office :	<u>addre</u>	<u>'55</u> :		EE.S		
	Corporate Creations Network, Inc.					JATE TATE	AH 11: 02	
	NEW Registered Office Address:							
	801 US Highway 1							
	North Palm Beach, FI	33408						
If this 1	imited liability company is not organized under the la			sts of El	— Iomida isiah w	nahar ayan Gun	مطايات المحمد	د طاع ممالات ا
change agent v	or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li	registe ability o	ered o comp	office an oany, it i	nd the business is hereby conf	s office of the	he regi the cha	stered nge(s)
	ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the					r as otherwi	ise prov	aded in
	ph Panholzer			-	er. Attorney-in-	Fact		
Signa	ture of a member or authorized representative of a member	Printed or typed name of signee						
provisi the obl to nigr	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d in writing of this change.	perfori	manc	e of my	duties, and Le	am Tamiliar	with a	nd accept
	oh Panholzer Joseph Panholzer, Special Secretary							
Signatu	re of Registered Agent							