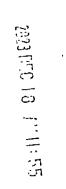
L21000134480

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Wmills						

Office Use Only



12.18 28--01010--008 *+25.00



1

COVER LETTER

Name of Limited Liability Company				
e Numbe				
810				

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	ame of the limited liability company: MIAMI'S INSIG	HT LLC		
2. (a)	4000 Hollywood Blvd, STE 555-S	-{	4000 Hol	lywood Blvd, STE 555-S
2. (")	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Hollywood, FL		Hollywoo	d, FL
	33021	_	33021	
	12/07/2023		L21000134	4480
3.	Date of tiling/registration in Florida	4.		Document number
5. (a)	USA Gestiones, LLC			
	Registered Agent and Registered Office shown on the records of USA Gestiones, LLC	the Florid	a Dept. of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 990 Biscayne Blvd Ste. 501-16			_
	Miami . FI	33132	1.5.11	2023
	JOSE A MARTINEZ LAYTON			OF C
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_ ம
	MIAMI'S INSIGHT LLC			
	NEW Registered Office Address:			ਾ - ਜ਼
	4000 Hollywood Blvd, STE 555-S			. ហ –
	Hollywood FI	33021		
change agent v was/wo the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of cles of organization or the operating agreement of the lost work of a member or authorized representative of a member	register ability co of the lin limited	ed office an ompany, it i nited liabilit liability con	ad the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
provisi the obl to mere notified	by accept the appointment as registered agent and agricons 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 effice address, I if I in writing of the change	perform d för in 0	ance of my Thanter 605	duties, and Lam familiar with and accept 5 F.S. Or if this document is being filed