## Florida Department of State

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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: govdoes@corpcreations.com

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## LLC REGISTERED AGENT CHANGE GIGLY MANAGEMENT HOLDINGS, LLC

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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  | me of the limited liability company: GIGLY MANAG   | EMENT F  | IOLDING   | S, L1.C   |                         |
|---|--|--|---|---|-------------------------|
|   | 13014 N DALE MABRY HWY   | (b)  | (b) 13014 N DALE MABRY HWY                          |   |                         |
| 2. (a)  | Principal office address of finited liability company:  (Note: MUST BE STREET ADDRESS)   | (0)  |   | Mailing address of limited liability company:<br>(Note: MAY BE POST OFFICE BOX)   |                         |
|   | STE 341  | _  | \$TE 341  | ,   |                         |
|   | TAMPA, FL 33618  |  | TAMPA   | , FL 33618  |                         |
|   | 04/21/2021   |  | L21000185   | 5689  |                         |
| 3.  | Date of filing/registration in Florida CORPORATION SERVICE COMPANY   | 4.   |   | Document number   |                         |
| 5. (a)  | Registered Agent and Registered Office shown on the records of 1201 HAYS STREET  | the Flurida  | Dept. of Sta  | ue:   |                         |
|   | Registered Office Address (MUST BE FLORIDA STREET.   | ADDRESS  | !   | _   |                         |
| ihl   | TAILAHASSEE , FL   | 32301  |   | - 200<br>- 200<br>- 200   | ,<br>,                  |
|   | Corporate Creations Network Inc.   |  |   | 2021 UCT - 6  | ·<br>}<br>}             |
|   | Enter name of NEW Registered Agent and/or NEW Registered Office address:   |  | San o   | ה<br>ה<br>ה   |                         |
|   | 801 US Highway 1   |  | · ·- ·  |   | D (                     |
|   | NEW Registered Office Address:   |  |   | JCI - 6 FM 3: 00<br>Advise : FT 0: 1971<br>Advise : FT 0: 10810;  | မာ<br>၁                 |
|   | North Palm Beach , FI  | 33408  |   |   |                         |
| change<br>agent v                                 | imited liability company is not organized under the law<br>or changes are made, the Florida street address of the<br>will be identical. Or, in the case of a Florida limited lia-<br>ere authorized by an affirmative vote of the members of<br>teles of organization or the operating agreement of the                | ws of the<br>registere<br>ability con<br>of the limi<br>limited li | mpany, it<br>ited liabili<br>ability co             | is hereby confirmed that the change(s) ity company or as otherwise provided impany.   |                         |
|   | Line   | Carlo  | os M Alvar  | ez. Attorney-in-Pact  |                         |
| I here<br>provisi<br>the obl<br>to mer<br>notifie | ture of a member of authorized representative of a member by accept the appointment as registered agent and agricus of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. I did no writing of this change. | ve to act<br>performa<br>d for in C<br>hereby co                   | in this cap<br>nce of my<br>hapter 60<br>nfirm that | Printed or typed name of signee pacity. I further agree to comply with a ditties, and I am familiar with and acc 5, F.S. Or, if this document is being fit the limited liability company has been | the<br>zept<br>led<br>t |
|   | los M Alvarez, Special Secretary   |  |   |   |                         |
| Signan  | re of Registered Agent   |  |   |   |                         |