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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: Levita Holdings, L	.I.(.	
2. (a)	Levita Holdings, LLC	(b)	
()	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)		Mailing address of fimited liability company: (Note: MAYBE POST OFFICE BOX)
	85 West Street, 3rd Floor		
	Walpole MA 02081		
	May 5, 2021		L21000196549
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Mark R. Sanders		
J. (4)	Registered Agent and Registered Office shown on the records of the	ne Florida Dep	or of State.
	Registered Office Address	DDRESS)	
	12410 N.W. 39th Street		
	Coral Springs FL	33065	
(b)	C T Corporation System		PI AU
107	Enter name of NEW Registered Agent and/or NEW Registered (Office address	FILEB PH 1: 45 SLEWHASSEE FLORIDE
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation, FL	33324	
the cha agent v was/w	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of years hard by: erating agreement of the limited liability.	the registered bility comparts the limited limited liabi	ed office and the husiness office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company.
	Carlos Castimais	Carlos C	
I here provis the object o mer notifige	ture of a member or authorized representative of a member by accept the appointment as registered agent and agra ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h of in withing of this change. Copocinio System Stephen Rullis, VP & Asst. ire of Registered Agent	ee to act in to performance I for in Chap ereby confi Secy.	Printed or typed name of signee this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pier 605, F.S. Or, if this document is being filed rm that the limited liability company has been