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Division of Corporations

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From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017

: (855)498-5500

Fax Number

: (800)432-3622

**Enter the email address for this business entity to be used for future.

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41	Addrace:			
mall	DUULBEE:			

LLC REGISTERED AGENT CHANGE MOSS USA, LLC

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M. SOLOMON

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H24000323532

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.

	ame of the limited liability company: Moss USA, LLC		(b)						
- . ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	8010 Woodlands Center Blvd, Suite 700			8010 Woodlands Center Blvd, Suite 700					
	Tampa, FL 33625	_	-	Tampa, F	L 33625				
	5/7/2021		I.	21000202	2920				
3.	Date of filing/registration in Florida	4.			Document nu	ımber			
5. (a)	Registered Agent and Registered Office shown on the records of t	he Flor	ida f	of Sta	ute:				
	Victor W. Holcomb	110 1 101	144 (ope. Of Sta					
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRE</u>	<u>(SS)</u>	· · · · · ·	_				
	3203 W. Cypress St				_	(7)	20		
	Tampa , FL	33607			_	그러	24 SI	-310	
					-	존약	7	S & S	
(b)	Enter name of NEW Registered Agent and/or NEW Registered				_	3.1.1.1 On 1.1.1	23	(F-132	
	Enter name of NEW Registered Agent and/or NEW Registered	Otilce	<u>addr</u>	<u>CS5</u> :		SE 0.7	20		
	Corporation Service Company					1.100 Tagi	ل : 0	O	
	NEW Registered Office Address:	_					10		
	1201 Hays St				_				
	Tallahassee, FL	32301			_				
change agent v was/we	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 lia cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	s of the registe bility of the li	ne S cred com imite	office ar pany, it i ed liabili	nd the business is hereby confi ty company or	office of the rmed that the	registe	red e(s)	
	Marian			Ross Woo		,			
_	ture of a member or authorized representative of a member				- *	d name of signed		tali, ali i	
provisi the obl to mer	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h I in writing of this change.	orinn	771 /7 P)	ce of mu	duties and La	m lamiliar wi	ith and	accent	
	Ranae Patterson								

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent