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(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195									
REFERENCE : 669958 5150630									
AUTHORIZATION :									
COST LIMIT : \$ 25.00									
ORDER DATE : May 11, 2022									
ORDER TIME : 2:07 PM									
ORDER NO. : 669958-010									
CUSTOMER NO: 5150630									
CHANGE OF AGENT									
NAME: PRIMESTAR FLORIDA, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Alexxis Weiland EXT#									
EXAMINER:									

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	me of the limited liability company: PRIMESTAR FLO	ORIDA	۱, L	LC				
2.	(a)		(b)					
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	,	,	Mailing address of (Note: MAY BI	limited liab	oility co	mpany:
		4702 SW 74TH AVE. MIAMI, FL 33155	_		4702 SW	2 SW 74TH AVE. MIAMI, FL 33155			
		05/13/2021	-	l -	.21000223	731			
3.		Date of filing/registration in Florida	4.			Document nun	nber		
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State CABRERA, ALVARO				- »: -			
		Registered Office Address (MUST BE FLORIDA STREET A.	(DDRESS)			. 20 St.			
		4702 SOUTHWEST 74TH AVE.				ZOR PAL		€	
		MIAMI	33155				PL 2022 HAY 1 1 SECK SHA		extra-
	(b)				re <u>ss</u> :		AHASSEE FL	AM 10: 26	
		NEW Registered Office Address:				-			
		1201 Hays Street		·					
		Tallahassee . FL	32301			-			
cha aga wa	ange ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister vility co the lir	red on nit	l office and ipany, it is ed liability	I the business of the hereby confirm or a	office of the of the of the office of the of	ne regi he cha	stered nge(s)
/:	s/ Alv	varo Cabrera	Alv	/ar	o Cabrera				
		ure of a member or authorized representative of a member				Printed or typed i	name of sign	nee	
pre the to	ovisio obli mere sified	by accept the appointment as registered agent and agred ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided tly reflect a change in the registered office address, I had I in writing of this change.	erform	w	ice of my d	luties, ånd I am	r Familiar	with a	nd accept
스 Sie		re of Registered Agent							