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C. BRUMBLEY

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Supiens Holdings LLC Name of Elimited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeremy A. Martins Name of Person
Eupiens Holdings LLC Firm/Company
1259 SW 410th Ave, APT 1910 Address
Pompiumo Beach, FL 33069 City/State and Zip Code
Sapiens holdings II (@ gmail Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Terewy A. Martins at (901) 832-0476 Name of Person Area Code & Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Englosed is a check for the following amount:

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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. Name of the limited liability company: Sapiens Holdings LLC 2. (a) 2754 (1) Atlantic Blydo (b) 1259 Sly4(6th Ave Add 19	 W
2. (a) L + Y Lot +	ЦÛ
Hompano Beach, FL Hompano Beach, FL	
12100256899	
3. Date of filing/registration in Florida 4. Document number	_
5. (a)	
MJ TAXES AND MORE INC	
2754 WEST ATLANTIC BLVD FLORIDA STREET ADDRESS POMPANO BEACH, FL 33069	
(b) Jereny A. Martins	
Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Office Address: 1259 St.) 410th Ave Ant 1910	
Pomparo Beach FL 33009	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after t change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in	
the articles of organization or the operating agreement of the limited liability company.	
Signature of a member of authorized representative of a member Printed or typed name of signee	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.	e pt d

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