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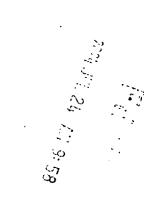
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COVER LETTER

Registration Section TO: Division of Corporations FAIRY HILL VENTURES LLC SUBJECT: Name of Limited 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: Michael Serrano Name of Person ZenBusiness Inc. Firm/Company 336 E. College Ave. Suite 301 Address Tallahassee, FL 32301 City/State and Zip Code ra@zenbusiness.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Serrano Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

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. N	ame of the limited liability company:FAIRY	HI	LL VENT	TURES LLC		
2. (a)	11551 SW 30th Street Unit 307		(b) 11551 SW 30th Street Unit 307			
-, (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limite (Note: MAY BE POS		-
	Miramar, FL 33025		Miramar,	FL 33025		
	06/08/2021		L21000266	023		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	NONE Registered Agent Resigned: 04/16/2024					
<i>5.</i> (a)	Registered Office Address (MUST BE FLORIDA STREET ADD	RESS)		_		
	Registered Office Address (ST BE FLORIDA STREET ADDRES	SS)	 	_		
	, FL	·		_		
(b)	ZenBusiness Inc			_	13	
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		े ५ <u>५</u> , =	, II
	336 E. College Ave. Suite 301			_	72.	
	NEW Registered Office Address:					1 * 4
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					20 74	
	Tallahassee , FL	. 3	2301			
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registability of the l	ered office an company, it i imited liabilit	d the business office s hereby confirmed to company or as other	of the regist hat the chan	ered ge(s)
/s/	Sean Fraser			Sean Fraser - M	/lember	
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of	of signee	
I here provis the ob to mer notifie	hy accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address, I have the complete address of the complete addr	ee to a perfor d for it hereby	ict in this cap mance of my n Chapter 605 confirm that	acity. I further agree duties, and I am fam i, F.S. Or, if this doc the limited liability c	e to comply v iliar with an cument is bei company has	vith the d accept ng filed been
Signate	ire of Registered Agent					