L21000290109

	(Requestor's Name)				
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	(Address)				
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	(City/State/Zip/Prione #)				
	<u></u>				
PICK-UF	WAIT MAIL				
	(Business Entity Name)				
(Document Number)					
Codified Copies	Certificates of Status				
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Special Instructions to	Filing Officer:				

Office Use Only



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2023 AUG -7 AM IO: 21



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000195				
	REFERENCE	:	913383// 8252034				
	AUTHORIZATION	:	(squide man)				
	COST LIMIT	:	\$ 25.00				
ORDER DATE : .	August 1, 2023						
ORDER TIME :	10:51 AM						
ORDER NO. :	913383-024						
CUSTOMER NO:	8252034						
CHANGE OF AGENT							
NAME:	HAFO LLC						
CERTIF	THE FOLLOWING AS THE FOLLOWING AS THE FOLLOWING AS THE FOLLOWING AS	PRC	OOF OF FILING:				

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

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	lame of the limited liability company:						
2. (a)	1200 Ponce de Leon Blyd		(b) 1200 Ponce de Leon Blvd.,				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 703				
	Suite 703						
	Coral Gables, FL 33134		Coral Gal	bles, FL 33134			
	06/22/2021		L21000290	0109			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	Marcell Felipe, P.A						
<i>5.</i> (u,	Registered Agent and Registered Office shown on the records of 1200 Ponce de Leon Blvd.,	of the Florid	a Dept. of State	- e:			
	Registered Office Address (MUST BE FLORIDA STREE Suite 703	<u>27</u>	1. 2 !				
	Coral Gables	33134		POR AUG -7			
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	ed Office ad	ldress:	FILED 1028 AUG -7 AM 10: 21 STUDY OF STATE ALLAHASSEE, FLORIDA			
	NEW Registered Office Address:						
	1201 Hays Street	-					
	Tallahassee F	L_32301		_			
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited between authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registere liability co of the lim re limited l	ed office and ompany, it is lited liability liability com	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.			
/	s/ Jessica Megdal nture of a member or authorized representative of a member	Jes —	sica Megdal	I, Authorized Person			
I here provis the ob to mer	aure of a memoer or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and completeligations of my position as registered agent as providely reflect a change in the registered office address, it is writing of this change.	gree to act e perform led for in C I hereby co	in this capa ance of my a Thapter 605, onfirm that t	Printed or typed name of signee acity. I further agree to comply with the luties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been			
	/s/ Grace E. Kirby	<u>Gr</u>	Grace E. Kirby, Asst Vice President				
orgnan	ne or refrateren whent						