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Division of Corporations

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Account Number : I20090000081

Phone

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K. SALY

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To: 18506176383

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 hability 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. American Globa	I Partner ELC	
2. (a)	Principal office address of limited liability company.	(b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	6541 SW 57th PI		517 Titleist Dr
	South Miami FL 33143		Mansfield TX 76063
	06/23/21	Ĺ.	2 i 0 0 0 2 9 1 9 4 4
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	UNITED STATES CORPORATION AGENTS, INC.		
(40)	Registered Agent and Registered Office shown on the records o	t the Florida I	Pept, of State
	476 RIVERSIDE AVE.		
	Registered Office Address	ADDRESS)	- -
	JACKSONVILLE F	L_32202	P & T
(b)	Registered Acents Inc		PRESIDENT PRINTED TALLERINGS SERVER PRINTED TO S
	Enter name of NEW Registered Agent and/or NEW Registere	d Office addr	<u>~</u> ~ π
			图 宝 它
	7901 4th St N		
	NEW Registered Office Address		· · · · · · · · · · · · · · · · · · ·
	STE 300		
	St. Pelerspurg	33702 L	
145 (4)	imited liability company is not organized under the la		ture of Elevida, it is harshy confirmed that after
the cha	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited left authorized by an affirmative vote of the members	of the registe liability con	ered office and the business office of the registered ipany, it is hereby confirmed that the change(s)
19	icles of organization or the operating agreement of the		
Sun	dure of a member of authorized representative of a member	Robin ———	Printed or typed name of signee
There provis the ob- to mer notifie	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided reflect a change in the registered office address. It is writing of this change. Outin writing of this change. David Roberts - Assistant	e performai ed for in Cl Thereby con -	whis canacity. I further away to county with the
	or of Registered Agent	000.01tm y	