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(F	Requestor's Name)	
(A	Address)	
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(0	City/State/Zip/Phone #	<i>t</i>)
PICK-UP	WAIT	MAIL
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([Document Number)	
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CORPORATION SERVICE COMPANY

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

ACCOUNT NO.	:	1200000001	95			
REFERENCE	:	612516	8406105			
AUTHORIZATION	:	San	Marie Contraction of the Contrac			
COST LIMIT	:	\$ 25.00	Likeman			
ORDER DATE: March 27, 2023						
ORDER TIME : 2:21 PM						
ORDER NO. : 612516-080						
CUSTOMER NO: 8406105						
CHANGE OF AGENT						
NAME: WIRELESS RETAIL OPERATORS, LLC						
PLEASE RETURN THE FOLLOWING AS	PRO	OF OF FILI	NG:			
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker	·	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. N	ame of the limited liability company:	SS RETAIL OPE	RATORS,	LLC
2. (a)	800 S DOUGLAS POAD STE 450	(b	800 S. DO	DUGLAS ROAD STE. 450
2. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	CORAL GABLES, FL 33134		CORAL G	SABLES, FL 33134
				
	07/19/2021	:		174
3.	Date of filing/registration in Florida	4.		Document number
5. (a))			
	Registered Agent and Registered Office shown on the rec	cords of the Florida	Dept. of State	- ::
	CESAR GOMEZ P.A.			
	Registered Office Address (MUST BE FLORIDA ST			
	12001 sw 119 Street			
	Miami	_{EI} 33186		10
		1 L	· .	
(b)				AND: 00
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	gistered Office add	ress:	0: 0 FIA:
	Corporation Service Company			L.W. O
	NEW Registered Office Address:			
	1201 Hays Street			
·	Tallahassee	FL		
agent was/w	limited liability company is not organized under e or changes are made, the Florida street address will be identical. Or, in the case of a Florida lim ere authorized by an affirmative vote of the men icles of organization or the operating agreement	of the registered lited liability cor on the limi	l office and npany, it is ted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	/s/ Brett Beveridge	Brett	Beveridge	, Authorized Person
Signa	ature of a member or authorized representative of a member	r		Printed or typed name of signee
provisi the ob- to mer	by accept the appointment as registered agent a ions of all statutes relative to the proper and con ligations of my position as registered agent as p ely reflect a change in the registered office addr d in writing of this change.	nd agree to act i nplete performa rovided for in Ci ess, I hereby cor	n this capa ice of my d iapter 605, ifirm that ti	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been

Grace E. Kirby, Asst. Vice President

Signature of Registered Agent