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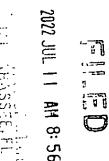
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						

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COVER LETTER

io:	Registration Section Division of Corporations					
SUBJ	ECT: A&N LAVISH PRODUCT		ishility Company		_	
	1	Name of Limited I	лаопну Сопрану			
Dear :	Sir or Madam:					
The e	nclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning	g this matter to the	following:			
Melis	sa Jones					
	Name of Person		_			
ZenB	usiness Inc.					
	Firm/Company					
	. ,			<u>-</u>	202	
336 E	. College Ave. Suite 301				12 JU	٦-
	Address			2		. ==
Tallal	nassee, FL 32301			;;; ;;;; ;;;;		:
	City/State and Zip Coo	te		(1) (1) 	2022 JUL 11 AH 8: 56	
ra@z	enbusiness com			,44 g	95	
	E-mail address: (to be used for future	annual report noti	fication)			
For fi	orther information concerning this ma	tter, please call:				
Me	lissa Jones	844 at (493-6249			
	Name of Person		Area Code & Daytime Telep	ohone Numl	ser	
	Mailing Address:		Street Address:			
	Registration Section Division of Corporations		Registration Section Division of Corporations			
	P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street. S			
			Tallahassee, FL 32303			
	Enclosed is a check for the follow	ving amount:				
	□ \$25 Filing Fee	= :	\$55 Filing Fee & Certified Copy	7		

INHS18 (2/14)

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: A&N LAV	<u>ISH PRODL</u>	JCTIONS LLC		
2. (a)	3490 NORTHWEST 213TH STREET	(b) 3490 NO	(b) 3490 NORTHWEST 213TH STREET		
L. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ,,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	N/A	N/A			
	MIAMI GARDENS, FL 33056	MIAM	I GARDENS, FL 33056		
	07/21/2021	L21000	0331430		
 (a) 	Date of filing/registration in Florida Registered Agents Inc.	4.	Document number		
J. (L)	Registered Agent and Registered Office shown on the records of t 7901 4th St N	he Florida Dept. of State	- : :		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	. 20		
	St. Petersburg FL	33702	ال 122 کا		
(b)	ZenBusiness Inc Enter name of NEW Registered Agent and/or NEW Registered 336 E. College Ave.	LI AM 8:			
	NEW Registered Office Address:		56		
	Suite 301		_		
	Tallahassee , FL	32301	_		
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 o icles of organization or the operating agreement of the	registered office and bility company, it is f the limited liability	d the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in		
<u> </u>	Andre Woodard	Andre Woo			
_	ature of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	narformanca of mis a	tutios, and I am familiar with and accont		