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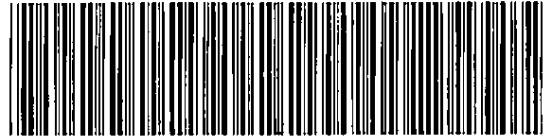
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SUBJECT: ONE-CLICK WHOLESALE DISTRIBUTION LLC

Dear Sir or Madam:

Please return all correspondence concerning this matter to the following:

Name of Person

6860 SW 50th Terrace

Address

Miami, FL 33155

City/State and Zip Code

cmr127@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Rodriguez

305

926-9826

at (_____


Name of Person

Area Code & Daytime Telephone Number

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
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

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2023.11.27 11:10:22

**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. Name of the limited liability company: ONE-CLICK WHOLESALE DISTRIBUTION LLC

2. (a) 6303 BLUE LAGOON DRIVE SUITE 400 (b) 6303 BLUE LAGOON DRIVE SUITE 400

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

MIAMI, FL 33126

MIAMI, FL 33126

08/24/2021

L21000378564

3. Date of filing/registration in Florida 4. Document number

5. (a) REGISTERED AGENT SOLUTIONS, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

155 OFFICE PLAZA DR. SUITE A

TALLAHASSEE, FL 32301

(b) Christine Rodriguez

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Christine Rodriguez

NEW Registered Office Address:

6860 SW 50th Terrace

Miami, FL 33155

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Christine M. Rodriguez

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

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