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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE HENDERSON WEATHERFORD, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

## 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.	Νz	ame of the limited liability company: HENI	IDERSON WEATHERFORD, LLC			
2. (	a)	12895 SW 132ND ST	<b>(b)</b>	12895 SW 132ND ST		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (7).	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		MIAMI, FL 33186		MIAMI, FL 33186		
		12/09/2021	_	L21000518505		
3.		Date of filing/registration in Florida	4.	Document number		
5. (	a)	CORPORATION SERVICE COMP	PANY			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	1201 HAYS STREET					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		TALLAHASSEE, FL_	32301-	-2525		
(b	)	Corporate Creations Network In	C.			
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		801 US Highway 1				
		NEW Registered Office Address:	<del></del>			
		North Palm Beach , FL_	334	<del>1</del> 08		
chang agent was/v	w vei	mited liability company is not organized under the laws or changes are made, the Florida street address of the re ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egistered o ility comp the limited	office and the business office of the registered pany, it is hereby confumed that the change(s) and liability company or as otherwise provided in		
		re of a member or authorized representative of a member		Rachel Joseph, Attorney-in-Fact		
				Printed or typed name of signee		
the ol to me	dig rel	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	er formance for in Chap reby confi	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
Rac Signar	A.	al Joseph Rachel Joseph, Special Secre	etary			