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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Angel 333, LLC Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Sandra Cortes Name of Person	
Angel 333 LLC Firm/Company	
4505 Banyon Lane Address	
Migmi, Fl 33137 City/State and Zip Code	
E-mail address: (to be used for future annual report For further information concerning this matter, please c	
Sandra Cortes at (305) S19 - 7327 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: 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 amoun-	t: /
□ \$25 Filing Fee	S55 Filing Fee & Certified Copy
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. Na	me of the limited liability company:Angel 3	33 LLC	
	4505 Banyon Lane		4505 Bungan Lone
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami, FL 33137		Miami, FL 33137
	01/03/2022		L22 000001678
3.	Ot 03 2022 Date of filing/registration in Florida	4.	Document number
5. (a)	Hasner, Mark M, Esq. Registered Agent and Registered Office shown on the records of t	he Florida Dent	of State:
	Registered Office Address MUST BE FLORIDA STREET		
	One S.Z. 3rd Ave Suite 2		
	<u>Miami</u> .FL	33131	
(b)	Sondra Cortes		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	;
	4505 Bonyon Lone		
	NEW Registered Office Address:		
			····
	Miami FI	3313	7
change agent v	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of ides of organization or the operating agreement of the	registered of ability compa of the limited limited liabil	ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provise the ob- to mer notific	by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide all reflect a change in the registered office address. It is in writing of this mange.	d for in Chap hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ner 605, F.S. Or, if this document is being filed in that the limited liability company has been 2013
Signate	ne of Registered Agent	·	