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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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LLC REGISTERED AGENT CHANGE AH&MF HOLDINGS, LLC

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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. Nan	ne of the limited liability company: AH&MF HOLD	DINGS,	3, LLC	_
2. (a) _	4904 CREEKSIDE DRIVE		b) 4904 CREEKSIDE DRIVE	
2. (a) <u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	CLEARWATER, FL 33760	_	CLEARWATER, FL 33760	_
		_		_
	01/07/2022		L22000006622	
3.	Date of filing/registration in Florida	4.	Document number	_
5. (a)	HUNTER BUSINESS LAW			
	Registered Agent and Registered Office shown on the records of the	he Florida	la Dept. of State.	
	119 S. DAKOTA AVENUE			
•	Registered Office Address (MUST BE FLORIDA STREET A	DDRESSI	:5)	
	TAMPA .FL	33606	 06	
(b) _	Corporate Creations Network Inc.			
ſ	Enter name of NEW Registered Agent and/or NEW Registered	Office ado	FILI SE	
	204 HC Highway 4		H A	
	801 US Highway 1 NEW Registered Office Address:	···-		
	registered Office Address.		т. — Щ	
			 <u></u>	
	North Palm Beach	3340	3: 06 STATE LORID	
			7>	
change of agent wowas/wei	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of these of organization or the operating agreement of the	registere bility con f the limi limited li	company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in liability company.	tC
	itlin Lazarus	Cai	aitlin Lazarus, Attomey-in-Fact	
-	ire of a member or authorized representative of a member		Printed or typed name of signee	
provision the obligate to mere	y accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I h in writing of this change.	ee to act performa I for in C iereby co	it in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been	e ot d
/s/ Cail	tlin Lazarus Caitlin Lazarus, Sp	oecial S	Secretary	

Signature of Registered Agent