Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000279425 3)))



H240002794253ABC2

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (5811694-8107 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.\*\*

Em a	i	1	Address:
LIDA	1		ACOLESS:

## LLC REGISTERED AGENT CHANGE OVERBOXES LLC

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

Elegtronic Filing Menu

Corporate Filing Menu

Help

K. SALY AUG 2 1 2024

## 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.

$\{a\}$	14410 Lake Candlewood Ct  Principal office address of limited liability company:	(b) 144   0 1	(b) Hailing address of limited liability company.	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company.  (Nate: MAY BE POST OFFICE HOX)	
	Miami Lakes, FL 33014	Miami L	Lakes, FL 33014	
	08/15/2022	L2200035	59083	
	Date of filing/registration in Florida	4.	Document number	
(a)	LEGALING CORPORATE SERVICES INC.			
1 ** }	Registered Agent and Registered Office shown on the records of	of the Florida Dept, of S	state:	
	476 Riverside Ave.			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	TALL'AHASSET FLORIDA	
	Jacksonville , 1	71	O A	
(b)	Corporate Creations Network Inc.		FLO.	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office address:	— 32	
	801 US Highway I			
	NEW Registered Office Address:	*****		

Kristen Espinales	Kristen Espinales, Attorney-in-Fact	
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.

Kristen Espinales Kristen Espinales, Special Secretary

Signature of Registered Agent