L22000369917

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COVER LETTER

Division of Corporations Global premium logsitics Ilc SUBJECT: _ Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Juan P Gaviria Name of Person Global premium logsitics Ilc Firm/Company 1395 brickell ave suite 813 Address Miami fl 33131 City/State and Zip Code juanpgaviria8@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Juan Gaviria 786₁ 8126127 at (Name of Person Area Code & Daytime Telephone Number Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □ \$55 Filing Fee & Certified Copy **S**25 Filing Fee

TO:

Registration Section

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.

I. N	Land Company Control of Harberton Community	premium lo	
2. (a)	4000 6 3 - 11 5 - 1 4000 - 1 - 1 1 00404	(b)	4005 Enistrall and aniles 040
(u/	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	00/07/0004		L22000369917
3.	Date of filing/registration in Florida	- <u> </u>	Document number
<i>3.</i>		٦.	Document number
5. (a			
	Registered Agent and Registered Office shown on the records of	the Florida Dept.	, of State:
	<u>-</u>	<u> </u>	
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	
	999 ponce de leon blvd		
	Coral gables .FL	33134	4
	112		2024 MAR
(b)	Juan P Gaviria		
ζ.,	Enter name of NEW Registered Agent and/or NEW Registered	Office address.	
			PH 1:12
	NEW Registered Office Address:		
	1300 bricell bay dr 1008		
	MIAMI , FL	33131	
changagent was/was/was/was/was/was/was/was/was/was/	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia zere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the latter of member or authorized representative of a member give accept the appointment as registered agent and agrations of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address. The	registered off bility compar f the limited l limited liabili ee to act in the	ice and the business office of the registered by, it is hereby confirmed that the change(s) tiability company or as otherwise provided in ty company. Juan P Gaviria Printed or typed name of signce is capacity. I further agree to comply with the of my duties, and I am familiar with and accept
notific	rely reflect a change in the registered office address, I hed in writing of this change. When the change is the registered office address in the registered Agent.	erchy confirn	n that the limited liability company has been