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COVER LETTER

Division of Corporations	
MT2, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
JOSE LUIS LOPEZ	
Name of Person	
MX GLOBAL CENTER LLC	
Firm/Company	
10330 LAKE RD SUITE F	
Address	
HOUSTON, TEXAS 77070	
City/State and Zip Code	
success@mxglobal.center	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, pleas	se call:
JOSE LUIS LOPEZ	832 603-0972
Name of Person	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 amount	unt:
■ \$25 Filing Fee	□ \$55 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. N	ame of the limited liability company: MT2, LLC					
2. (a)	2600 S DOUGLAS RD		(b) 2600 S DO	OUGLAS RD		
`,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability con (Note: MAY BE POST OFFICE B		
	SUITE 800		SUITE 800	0		
	CORAL GABLES, FLORIDA 33134-6149	_	CORAL G	ABLES, FLORIDA 33134-6149		
	9/28/2022		L220004208	897		
3.	Date of filing/registration in Florida	4.		Document number	_	
5. (a)	360 CORPORATE SOLUTIONS LLC					
J. (u)	Registered Agent and Registered Office shown on the records of	the Flo	rida Dept. of State	− c:		
	2600 S DOUGLAS RD			00	<u>ي</u> ت	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)	- :	2024 114	
	PH-8			:		
	CORAL GABLES	33134	ļ.	- 5		
	, FI		·	- -	:: :	
(b)	Registered Agents Inc			=		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	address:			
	NEW Registered Office Address:	· · ·		_		
	7901 4th St N Ste 300			_		
	St. Petersburg	33702	2	_		
agent was/w the art	limited 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 ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the authorized representative of a member of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It	e regist ability of the l limite 	ered office and company, it is limited liability d liability com KV CAPITAL L	d the business office of the regis s hereby confirmed that the char y company or as otherwise prov npany. LLC Printed or typed name of signee	stered nge(s) rided in	
	d in writing of this change.				o occii	

Signature of Registered Agent