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Division of Corporations

## Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE ONLYINDADERENTALS LLC

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DEPARTHENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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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.

| I. Na                                  | ame of the limited liability company:  OnlyinDadeRenta   | als LLC  |  |
|--|--|--|--|
| 2. (a)                                 | 245 Ne 33rd st. Apt. PH2   | (b)  |  |
| 2. (u)                                 | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  MIAMI, Florida (US) 33137   | (*)_   | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  |
|  |  |  |  |
|  | 10/10/2022 12:00:00 AM   | L  | .22000436449   |
| 3.                                     | Date of filing/registration in Florida   | 4,   | Document number  |
| 5. (a)                                 |  | . <del></del>  | <del></del>  |
|  | Registered Agent and Registered Office shown on the records of<br>LEGALINC CORPORATE SERVICES INC.   | the Florida D  | Dept. of State:  |
|  | Registered Office Address (MUST BE FLORIDA STREET) 476 RIVERSIDE AVE   | ADDRESS]   | ~>>  |
|  | JACKSONVILLE F1  | 32202  | ·  |
|  |  | <del></del>  | <del></del>  |
| (b)                                    |  |  |  |
|  | Enter name of NEW Registered Agent and/or NEW Registered   | Office addr  | <u>uaz.</u>  |
|  | Corporate Creations Network Inc.   |  |  |
|  | NEW Registered Office Address:   |  |  |
|  | 801 US Highway 1   |  | ······································   |
|  | North Palm Beach , FI  | 33408  | <del></del>  |
| change<br>agent v<br>was/we            | imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the | registered<br>ability com<br>of the limite<br>limited lial | d office and the business office of the registered inpany, it is hereby confirmed that the change(s) led liability company or as otherwise provided in ability company.  |
| Signa                                  | ture of a member or authorized representative of a member  | 12311161   | :lle W. Gossman, Special Manager  Printed or typed name of signee  |
| I here<br>provisi<br>the obl<br>to mer | 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 ly reflect a change in the registered office address, I do in writing of this change.                               | performan<br>d for in Cha<br>hereby con                    | in this capacity. I further agree to comply with the<br>nce of my duties, and I am familiar with and accept<br>hapter 605, F.S. Or, if this document is being filed<br>afirm that the limited liability company has been |
| Signatur                               | re of Panister Agent   | noizer, Sp   | Decial Secretary   |
| ១ស្វាលប                                | ire of Begistered Agent  |  |  |