Florida Department of States Division of Corporation

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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.

(a)	13151 NW 11th terrace	(1	b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami Florida (US)33182			
	10/20/2022 12:00:00 AM	_	1.22000452	2489
	Date of filing/registration in Florida	4.		Document number
(a)	LEGALINC CORPORATE SERVICES INC.			
()	Registered Agent and Registered Office shown on the records of t 476 Riverside Ave.	he Florid	a Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET A	ODDRES.	<u>S)</u>	_
	Jacksonville, FL	32202		202
(b)	Corporate Creations Network Inc.			7023 DEC
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ag	<u>ldress</u> :	
	801 US Highway 1			P
	NEW Registered Office Address:	_		
		33408		
ange ent v as/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register bility co f the lin	ed office ar impany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
	(Je)	Dan	ielle W. Gos	ssman, Special Manager
herei ovisi e obl mere	ture of a member of authorized representative of a member by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h	ee to ac perform I for in (pereby c	t in this cap ance of my Chapter 60, onfirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accepts. F.S. Or, if this document is being file the limited liability company has been
	d in writing of this change.			