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.

(((H24000060524 3)))



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To:

Division of Corporations

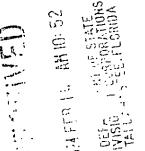
Fax Number : (850)617-6383

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Account Name : INCFILE.COM LLC Account Number : I20220000070 : (888)462-3453 Phone Fax Number : (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE MERCHSHIRI LLC

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COVER LETTER

(((H24000060524 3)))

ΓO: Registration Section	(((
Division of Corporations	
MERCHSHIRI LLC	
SUBJECT:	
Name of Lit	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fec(s) are submitted for fifing.
Please return all correspondence concerning this matter	r to the following:
LOVETTE DOBSON	
Name of Person	
Firm/Company	
17.250 6/74 7F2 113037 3.40 6/7F 3.20	
17350 STATE HWY 249 STE 220	
Address	
HOUSTON, TX 77064	
City/State and Zip Code	
EFILE1234@INCFILE.COM	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	cali:
to rather mornates concerning this mater, prease of	
LOVETTE DOBSON at (888-462-3453)
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 amoun	t:
■ \$25 Filling Fee	S55 Filing Fee & Certified Copy
NUIC10 / 2/1 's	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

ANHS18 (2/14)

(((H24000060524 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H24000060524 3)))

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. Na	une of the limited liability company.				
2. (a)	23392 SERENE MEADOW DRIVE SOUTH		2,3392 S	ERENE MEADOW DRIVE SOUTH	
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	``	···	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	BOCA RATON, FL 33428		BOCA R	ATON, FL 33428	
	01/26/2023		E.2300004	9986	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	ZENBUSINESS INC				
	Registered Agent and Registered Office shown on the records of the 336 E. COLLEGE AVE.				
	Registered Office Address	DDRESS	2	~	
(b)	TALLAHASSEE, FL_	32301		2024 FEB IL AM 8: 29 SECTIVATIANS SEE, FL	
	REPUBLIC REGISTERED AGENT LLC			FEBIL AM	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad	dress:	SSEE	
	1150 Nw 72nd Ave Tower I Ste 455			FA 2	
	NEW Registered Office Address			ni 💆	
	Miami	33126	****	_	
	FL_			_	
change agent v	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the I	registere bility co f the lim limited l	ed office a impany, it lited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
Signal	ture of a member or authorized representative of a member		****	Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete r igations of my position as registered agent as provided by reflect a change in the registered office address. The forwriting of this change,	re to act perform for in (erchy co	in this ca, mee of my hapter 66 infirm tha	pacity. I firther agree to comply with the eduties, and I am familiar with and accept 5, F.S. Or, if this document is being filed a the limited liability company has been	
Signatu	Colly Volun re of Registered Agent				