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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.

1. N	ame of the limited liability company:		
2. (a)	3330 BANKS RD		(b) 3330 BANKS RD
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	APT# 203		APT# 203
	MARGATE, FL 33063		MARGATE, FL 33063
	05/02/2024		L23000153869
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEGALINC CORPORATE SERVICES INC.		
	Registered Agent and Registered Office shown on the records o 476 RIVERSIDE AVE.	f the Flori	ida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>SS)</u>
	JACKSONVILLE, F	L_32202	······································
(b)	Corporate Creations Network Inc.		Address:
	Enter name of NEW Registered Agent and/or NEW Registere	d Office 1	address:
	801 US Highway 1		ייי רא רא
	NEW Registered Office Address:		
			3:
	North Palm Beach	33408	0

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Estrella Tavarez, Attorney-in-Fact

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Etralla Tavarez Estrella Tavarez, Special Secretary Signature of Registered Ageny

> Division of Corporations P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00