L23000161409

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COVER LETTER

O: Registration Section Division of Corporations							
SUBJECT:	AQUAZUL SU	rakers lle					
	Name of Lim	ited Liability Company					
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.					
Please return all corresp	condence concerning this matter	to the following:					
	Idalia.	Hame of Person					
		Name of Person					
	AQUAZ	UL SNEAKERS	s LLC				
	·	OL SNEAKERS					
	235 MAI	cal lagrande 1	1				
	2-2 /- /-	SON GRANDE A	<u>rue</u>				
	LEIMI	CH ACRES FI.	33936				
City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
	E-mail address: (to be used for future annual report notif	fication)				
For further information	concerning this matter, please ca	all:					
Idalu	Acina DIAZ	at (Z39) 998 -	9188				
Name	of Person	Area Code Daytimo	e Telephone Number				
Enclosed is a check for	the following amount:						
№ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

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

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.	Na	ame of the limited liability company:AauzuL	swalters	ис		
			(b)			
۷.	(a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address	s of limited liability company: V BE POST OFFICE BOX)		
		3709 18th st sw	3709 18H	54. SW		
		Leuriba Acres F1. 33976	Lehigh Acr	les A. 33976		
		3-31-2023	L2300016	1409		
3.		Date of filing/registration in Florida 4.	Document r	ıumber		
5.	(a)	SLOMARA MONGE LOPEZ				
		Registered Agent and Registered Office shown on the records of the Flo	ida Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRI	<u>:22)</u>			
		3709 18th St. Sw				
		Lehigh Acres ,FL 3	3976			
		CHRISTOPHER BEILE				
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		Enter hand of the strategisters regard and or the strategisters of the	HAMI \$45			
		233 MAISON GRANDE A	re.			
		NEW Registered Office Address:	<u> </u>			
		tehigh series				
			 			
		FL 3:	3936			
		limited/liability company is not organized under the laws of t e or changes are made, the Florida street address of the regist				
age	ent v	will be identical. Or, in the case of a Florida limited liability	company, it is hereby con	firmed that the change(s)		
the	s/we arti	ere authorized by an affirmative vote of the members of the icles of organization or the operating agreement of the limite	d liability company of	or as otherwise provided in		
		- traff ()	Idalia Acin	LA DIAZ		
-5	ignat	ature of a member or authorized representative of a member	Printed or typ	oed name of signee .		
pro the to	ovisie obli mere	by accept the appointment as registered agent and agree to a cions of all statutes relative to the proper and complete performents of my position as registered agent as provided for it reflect a change in the registered office address. Thereby a in writing of this change	mance of mŷ duties. ănd l	am familiar with and accept		
Sig	znatu	ure of Registered Agent				