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COVER LETTER

	Registration Section Division of Corporations				
SUBJE	ASP Holdings, LLC				
		Name of Limited Liability Company			
Dear Sii	or Madam:				
The enc	losed Registered Agent/Registered	Office Change and for	ee(s) are submitted for filing.		
Please r	eturn all correspondence concernir	ng this matter to the fo	ollowing:		
Kylie Ce	onrad & Kayla King				
_	Name of Person		_		
Corp1, I	nc.				
	Firm/Company		_		
7700 E	Arapahoe Rd Ste 220				
	Address		_		
Centenn	ial, CO 80112		_		
	City/State and Zip Co	ode			
E-	mail address: (to be used for future	e annual report notific	eation)		
For furt	her information concerning this ma	atter, please call:			
Kylie C	onrad	720 at (823-9273		
	Name of Person	(Area Code & Daytime Telephone Number		
	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		
	Enclosed is a check for the follo	wing amount:			
	■ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		

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:	, LLC	
2. (a)	13807 SW 142ND AVE, SUITE #4	(b)	807 SW 142ND AVE, SUITE #4
- . (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(8,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33186	Mi	AMI, FL 33186
	05/03/2023	1.230	000220364
3. 5. (a)	Date of filing/registration in Florida LOSADA, JESSE M	4.	Document number
J. (u)	Registered Agent and Registered Office shown on the records 13807 SW 142ND AVE, SUITE #4	of the Florida Dept	i, of State:
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	202
	MIAMI	FL_33186	
(b)	Registered Agents Inc		N
(0)	Enter name of NEW Registered Agent and/or NEW Registe	red Office address	
	7901 4th St N		: 26
	NEW Registered Office Address:		
	Ste 300	. <u>.</u>	
	St. Petersburg	FL_33702	
change agent was/w	limited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the second control of the core and the core and the core are the core and the core are the core are the core and the core are the	the registered of Hiability compa rs of the limited	Tice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/	JESS LOSADA	JESS LO	
~	ature of a member or authorized representative of a member	_	Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d'in writing of this change.	agree to act in the ele performance ided for in Chap I hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept are 605, F.S. Or, if this document is being filed m that the limited liability company has been
-	wid Roberts		
Signati	ire of Registered Agent		