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\*\*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 MAZZIERI GROUP LLC

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K. SALY

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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)	Monferrand 591	(b) Mo	onferrand 591
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Trenque Lauquen, FL 06400	Tre	enque Lauquen, FL 06400
	05/30/2023	L230	000261527
	Date of filing/registration in Florida	4.	Document number
. (a)	LEGALINC CORPORATE SERVICES INC.		
. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	t. of State:
	476 Riverside Ave.		~°
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	THE T
	Jacksonville	FL_32202	TALLANDER AH 3: 34 TALLANDER CETTONS
(b)	Corporate Creations Network Inc.		
	Enter name of NEW Registered Agent and/or NEW Registe	red Office address	[]; <u>u</u>
	801 US Highway 1		
	NEW Registered Office Address:		
	North Palm Beach	33408	
hange gent v vas/w	imited liability company is not organized under the e or changes are made, the Florida street address of will 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 street in the case of the member icles of organization or the operating agreement of the street in the case of the street in the street in the case of the street in th	the registered of Hiability compa rs of the limited	Fice and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	Kristen Espinales	Kristen F	ispinales, Attorney-in-Fact
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
l here rovisi he obi	hy 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,	agree to act in the le performance ided for in Chap I hereby confir	his capacity. I further agree to comply with the of my duties, and I am Jamiliar with and accept ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
o mer otifie	d'in writing of this change.	• •	