## L23000422026

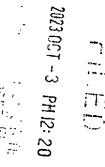
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## **COVER LETTER**

TO: Registration Section Division of Corporations	•	
SUBJECT: J+ Photography Mia. Name of Limited Lie	ability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and it	fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the f	ollowing:	
Tationa Marrero Name of Person	_	
5+ Photography Miami Firm/Company	_	
9305 SW 77th Aug Apt # 235 Address	_	
Miami, FC 33156 City/State and Zip Code	<del></del>	
51. Photographymiam: Qamail com E-mail address: (b be used for future amoual report notific	cation)	
For further information concerning this matter, please call:		
Tationa Marvero at (305	) 986-4122 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 following amount:		
S25 Filing Fee S5.	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

## 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. Name of the limited liability company: 5+ 5	Photography Migmi
2. (a) 9305 SW 77th Ave Apt 235	(b) 9305 SW 77 Ave Apt 235
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	
Mian, R 33156	Miami, 9, 33156
<del></del>	
9/11/2023	L23000422026
3. Date of filing/registration in Florida	4. Document number
5. (a) Tationa Marrevo	
Registered Agent and Registered Office shown on the recor	rds of the Florida Dept. of State:
9305 SW 771h Au Apt	235
Registered Office Address (MUST BE FLORIDA STR.	EET ADDRESS)
Miami	.FL 33156 23 0CT
+ 1.	OCT The second s
(b) Tationa Mayvivo  Enter name of NEW Registered Agent and or NEW Regis	tand Office address:
Enter famile of NEW Registered Agent and of NEW Regis	stered Office address:  PH 235
9305 SW 7714 Avy Ap	+ 230
NEW Registered Office Address:	
	;÷; • • • • • • • • • • • • • • • • • •
Miami	.fl_33156_
If the limited liability company is not organized under th	ne laws of the State of Florida, it is hereby confirmed that after the
change or changes are made, the Florida street address o	of the registered office and the business office of the registered
was/were authorized by an affirmative vote of the memb	ed liability company, it is hereby confirmed that the change(s) pers of the limited liability company or as otherwise provided in
the articles of organization or the operating agreement of	- · · · · · · · · · · · · · · · · · · ·
Signature of a member or authorized representative of a member	Tationa Mavilvo Printed or typed name of signee
provisions of all statutes relative to the proper and comp the obligations of my position as registered agent as pro to merely reflect a change in the registered office addres notified in pariting of this change.	d agree to act in this capacity. I further agree to comply with the plete performance of my duties, and I am familiar with and accept wided for in Chapter 605, F.S. Or, if this document is being filed as, I hereby confirm that the limited liability company has been
Signarure of Registered Agent	_
SIGNALIA VI REGIMETEU AMEUT	