L24-2-00121120

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TO: Regis	stration Section sion of Corporations		
SUBJECT:	LOPEZ MULTISOLUTIONS LLC		
SUBJECT.	Name	Liability Company	
Dear Sir or M	fadam:		
The enclosed	Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.
Please return	all correspondence concerning this	matter to the	following:
TUA NA FRAI	NCIS LOPEZ		
	Name of Person		
LOPEZ MUL	TISOLUTIONS LLC		
	Firm/Company		
16121 NE 187	TH PL APT 3		
 	Address		
NORTH MIA	MI BEACH, FL 33162		
	City/State and Zip Code		
franncis29@h	otmail.com		
E-mail	address: (to be used for future annu	al report noti	fication)
For further in	nformation concerning this matter, p	lease call:	
JUANA LOPI	EZ	+1 at (9549186091
	Name of Person		Area Code & Daytime Telephone Number
Regi Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	osed is a check for the following a		\$55 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. Name of the limited liability company: LOPEZ MULTISOLUTIONS LLC					
2. (a)	16121 NE 18TH PL APT 3	(b	16121 1	NE 18TH PL APT 3	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		-			
	03/5/2024	_	L240001	2120	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	LOPEZ, JUANA FRANCIS				
). (a)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of S	tate:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	_	
	16121 NE 18TH PL APT 3				
	NORTH MIAMI BEACH , FL	33162	······································		
(b)	JUANA F LOPEZ Y LOPEZ			FILE 2024 MAY -6	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	一一一	
				FILED FILED	
				_ F D	
	NEW Registered Office Address:			2 7 N	
	16121 NE 18TH PL APT 3			ED FH 12: 36	
	NORTH MIAMI BEACH , FL	33162			
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law ture of a member or authorized representative of a member	registere bility co f the lim limited l	ed office mpany, i ited liabi iability c	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in	
provisi the obi to meri notified	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to act performa I for in C ereby co	in this co ince of m Thapter 6 onfirm the	apacity. I further agree to comply with the y duties, and I am familiar with and accep. 05, F.S. Or, if this document is being filed at the limited liability company has been	