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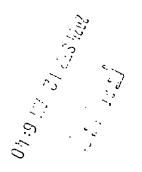
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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Bidmax Brokerage LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	change and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Richard Goldthwait						
Name of Person	<del></del> _					
Bidmax Brokerage LLC						
Firm/Company						
6501 CONGRESS AVE SUITE 240						
Address						
Boca Raton FL 33487						
City/State and Zip Code						
rgoldthwait@bidmax.com						
E-mail address: (to be used for future annual r	eport notification)					
For further information concerning this matter, plea	se call:					
Richard Goldthwait	460 4290					
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 following amo	ount:					
☑ \$25 Filing Fee	□ \$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. No	ame of the limited liability company: Bidmax Broke	erage	LLC		
2. (a)	6501 Congress Ave Suite 240 Boca Raton FL 3			ongress Ave Suite 240	D Boca Raton FL 3348
•	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited lia (Note: MAY BE POST O	
	03/21/2024		L24000°	139368	
3.	Date of filing/registration in Florida	<del></del> 4.		Document number	
5. (a)	JOSHUA BUTERA				-27
(u)	Registered Agent and Registered Office shown on the records of	of the Flo	orida Dept. of Sta	atc.	1.1.5 Hou?
	Registered Office Address	radd <u>r</u>	ESS)	<del>_</del>	
	2424 NORTH FEDERAL HIGHWAY SUITE 26	50		_	
	BOCA RATON F	L_334	31		6: 1:0
(b)	Richard Goldthwait Enter name of NEW Registered Agent and/or NEW Registered	ed Office	e address:	_	
	NEW Registered Office Address:			_	
	6501 Congress Ave Suite 240			_	
	BOCA RATON . F	ւ <u> 334</u>	87	_	
change agent v was/wa	imited liability company is not organized under the later changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e regis iability of the	tered office as company, it limited liabili	nd the business office of is hereby confirmed that ty company or as otherw	the registered the change(s)
	111	F	Richard Gold	fthwait	
Signa	dre of a member or authorized representative of a member	_		Printed or typed name of si	gnec
nrovi si	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and completi- igations of my position as registered agent as provide ly reflect a change in the registered office address, I I in writing of this change.	mortin	emonee at mi	abuies and Lom familia	r with and accent
Signatu	re of Registered Agent				