Florida Department of State

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To:			

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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 KASEYA US LLC

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To: Page, 3 of 3 2024-10-09 08 23.32 PDT 19548277645 From Karty Toon

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.

2. (a) <u>-</u> 7	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) SUITE 400	(b)	BRICKELL AVE Mailing address of limited liability company:
	(<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company:
	SUITE 400		(Note: MAY BE POST OFFICE BON)
		SUI	TE 400
-	MIAMI, FL 33134	ME	AMI, FL 33131
()	06/05/2009	24090	000002095
· -	Date of filing/registration in Florida	4,	Document number
5. (a) <u>(</u>	CORPORATION SERVICE COMPANY		
R	tegistered Agent and Registered Office shown on the records of t 1201 HAYS STREET	he Florida Dept.	of State:
_	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	
-	TALLAHASSEE E	32301	
	T Corporation System		
(b) <u> </u>	inter name of NEW Registered Agent and/or NEW Registered	Office address:	2624-601 - 9
3			
	NEW Registered Office Address:	E	
-	1200 South Pine Island Road		
1	Plantation . FL	33324	<u></u>
he chang igent wil vas/were	nited liability company is not organized under the law ge or changes are made, the Florida street address of If be identical. Or, in the case of a Florida limited lia e authorized by an affirmative vote of the members o es of organization or the operating agreement of the	the registered bility compar f the limited l	I office and the business office of the registered sy, it is hereby confirmed that the change(s) lability company or as otherwise provided in
/s/ Sepec	deh Tofigh	Sepedeh T	origh, MANAGER
Signatur	e of a member or authorized representative of a member		Printed or typed name of signee
rovisión he oblig o merely	caccept the appointment as registored agent and agrees of all statutes relative to the proper and complete pations of my position as registored agent as provided verified a change in the registered office address. I him writing of this change.	performance (l för in Chapt vereby confirn	is capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed a that the limited liability company has been
y: SEAN L.	C T Corporation System EMERICK, ASSISTANT SECRETARY of Registered Agent		