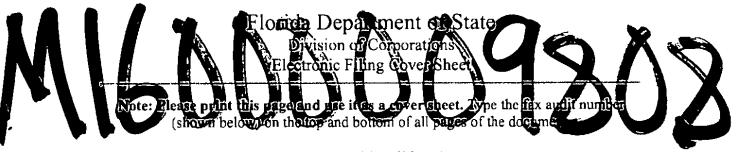
2/10/2021

Division of Corporations



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LLC REGISTERED AGENT CHANGE ADFUNKY HC 1, LLC

Certificate of Status	0
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M. SOLOMON

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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.

1.	Na	me of the limited liability company: ADFUNKY IIC 1,	LEC						_
2.	(a)		(o)					_
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				ailing address of limited (<u>Note: MAY RF, POST</u>	•	-	
		2121 PONCE DE LEON BLVD. SUITE 800			2121 Ponce De Leon Blvd. Suite 80				
		CORAL GABLES, FL 33134			Coral Gables, FL 33134				<u>-</u>
		12/07/2016		М1	60000098	08			
3.		Date of filing/registration in Florida	4.		<u> </u>	Document number			_
	(م)	CORPORATE CREATIONS NETWORK, INC.							
5. (a)		Registered Agent and Registered Office shown on the records of the Florida Dept, of State 801 US FIIGHWAY 1 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						202	
							:	<u> </u>	
		NORTH PALM BEACH, , FL.	33408				FASSON OLOGI PASSON OLOGI	FEB 10	
	(b)	C T Corporation System					ij <u>⊀</u>		
	(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office no	ldres:	<u>s</u> :		STATE	4H 10: 54	!
		NEW Registered Office Address:							
		1200 South Pine Island Road	-	_	<u>.</u>				
		Plantation, FL_	33324						
the age wa the	cha nt v s/wo arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill 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 l	the reg bility c f the lii	istere ompa nited	ed office any, it is I liability	and the business of hereby confirmed the company or as other	fice of the r hat the char	egistero ige(s)	ed
	(John Paul Aceves Are of a member or authorized representative of a member	Joh —	n Pat	ul Aceves	5.1.1			_
I h pro the to to not By:	ierei ovisi obl mere tifiee	by accept the appointment as registered agent and agra ions of all statutes relative to the proper and complete f igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. CT Corporation System Tracy Kelli are of Registered Agent	perfori I for in ereby c	nanc Cha confi	this capa e of my d pter 603, rm that th	uties, and Lam Jam. F.S. Or, if this doc he limited liability c	e to comole	with th ad acce ing file s been	e pt d

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