# MITCOCOUSS

(Requestor's Name)										
(Address)										
(Address)										
(City/State/Zip/Phone #)										
PICK-UP WAIT MAIL										
(Business Entity Name)										
(Document Number)										
Certified Copies Certificates of Status										
Special Instructions to Filing Officer:										

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I ALBRITTON

### CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 472031 8259806

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: February 11, 2022

ORDER TIME : 9:33 AM

ORDER NO. : 472031-005

CUSTOMER NO: 8259806

#### CHANGE OF AGENT

NAME: ASSEMBLY SOFTWARE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

#### **COVER LETTER**

TO:		stration Section sion of Corporations						
SUBJE	CT:	Assembly Software LLC						
		i	Name of Limite	d Liability Company				
Dear Si	i <b>r</b> or N	1adam:						
The end	closed	Registered Agent/Registered	Office Change a	and fee(s) are submitted for filing.				
Please	return	all correspondence concerning	g this matter to t	he following:				
Donald	d O'Le	ary						
		Name of Person		<del></del>				
Assem	ıbly So	oftware LLC						
		Firm/Company		<del></del>				
1550 M	/ladru	ga Ave., Ste. 508						
		Address	<del></del>	<del></del>				
Coral C	Gable:	s, FL 33146						
-		City/State and Zip Cod	e	<del></del>				
don@a	assem	blylegal.com						
E	-mail	address: (to be used for future	annual report no	otification)				
For fur	ther in	nformation concerning this mat	ter, please call:					
Don O'	'Leary		305 at (	357-6500				
		Name of Person	at (	Area Code & Daytime Telephone Number				
	Reg Divi P.O.	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				
	Encl	osed is a check for the follow	ing amount:					
	□ \$2	25 Filing Fee	0	\$55 Filing Fee & Certified Copy				
INHS18	3 (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. Na	ame of the limited liability company: Assembly Softv	vare LLO	<del></del>		<u> </u>				
2. (a)	Principal office address of limited liability company:		(b)						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
	1550 Madruga Ave., Ste. 508		1550 Madruga Ave., Ste 508						
	Coral Gables, FL 33146	<u> </u>	Coral Gables, FL 33146						
	01/19/2017		M1700000555						
3.	Date of filing/registration in Florida	<b>-</b> 4.		Document number					
5 (2)									
). (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	- e:					
	Ryan Pakter								
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>SS)</u>	_	0.	20;			
	1550 Madruga Ave., Ste. 508				1.EC.	22 F	-		
	Coral Gables . Fi	33146		<del>-</del>	LLAHASY	2022 FEB 14	) از مسمی مسمح		
				_	S		} 9 <del>~2*</del> 5		
(b)	Enter name of NEW Registered Agent and/or NEW Registered			-	SER	옾			
	Enter name of NEW Registered Agent and/or NEW Registere	d Office :	<u>ıddress</u> :		EST XIS	9: 23			
	Corporation Service Company			_		23			
	NEW Registered Office Address:		<del></del>	_					
	1201 Hays Street			_					
	Tallahassee, F	32301 L							
10.1.	limited liability company is not organized under the la				nfirmed	that afi	ter the		
change agent was/w	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe lability of of the li	red office an company, it is mited liabilit	d the business office s hereby confirmed to y company or as oth	e of the re that the c	egistere :hange(	ed (s)		
	Dinolean		onald O'Lean						
	nure of a member or authorized representative of a member		···	Printed or typed name					
I here provis the object of the notification o	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I of in writing of this change.	ree to a perfori d for in hereby	ct in this cape nance of my c Chapter 605 confirm that	acity. I further agreduties, and I am fam for F.S. Or, if this do the limited liability	re to com niliar with cument is company	ply wit h and a s being has be	h the iccept filed ien		
$\mathcal{U}$	Cocasi Waland, assistant va grasidant								