Florida Department of State Division of Corporations Electronic Filling Cover States

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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10:	Division of Corp	porations				5 5 22 5
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From:					Ć.	45
	Account Name :	CORPORATE CREA	TIONS	INTERNA	T ATIONAL	TI. LINC.
	Account Number :	110432003053				
	Phone : Fax Number :	(561)694-8107				بي
	THE HUNDE :	(201)414-0442				
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Electronic Filing Menu

Corporate Filing Menu

Help

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. 8	lame of the limited liability company: HIDDEN HAR	RBOR A	DVI	SORS, LLC					
2. (a)			(b) 4855 Technology Way						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Υ.	Mailing addres	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Suite 420, Suite 500			Suite 500, Suite 500		,			
	Fort Lauderdale, FL 33309			Boca Raton, FL 33431					
	08/08/2017			417000006779	-				
3.	Date of filing/registration in Florida	4.	-	Document t	oumber				
5. (a)	BUSINESS FILINGS INCORPORATED								
` '	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	of the Flo	onda i	Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET ADDRE			. <u></u> -	2022 350 37				
	PLANTATION . F	L_33324	1		2022 DEC : SEGNENTAL	7			
(b)	CORPORATE CREATIONS NETWORK INC.				-8 PM NASSE				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				Line of the second				
	801 US HIGHWAY I				PM I2: 03 OF STATE SEE, FL				
	NEW Registered Office Address:				: r; 				
	NORTH PALM BEACH	. 33408							
	, F	[
ngent w vas/we	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe lability of of the li	ered Comj imite	office and the business pany, it is hereby confi of liability company or	s office of the registere	:d			
Signat	ure of a member of authorized representative of a member	Ac	Adia Myius, Attorney-in-Fact						
I hereb provisio he obli o mere cotified	y accept the appointment as registered agent and agnoss of all statutes relative to the proper and complete gations of my position as registered agent as provide by effect a change in the registered office address. I may a continuous change. Adia Myles, Special Secretary	ree to a perform d for in hereby (ct in manc Cha conf	at the second second	ed name of signee or agree to comply with on jamiliar with and ac this document is being j ibility company has bee	i the coept filed in			