Florida Department of State 244 División of Corporations Electronic Films Coversheet

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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	ame of the limited liability company:	LLC					
2. (a)	650 Massachusetts Ave NW. Ste 600 office #81		(b)	50 Massac	husetts Ave N	W, Ste 600	office #81
2. (u)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:	(0)		-		nbility company: FFICE BOX)
	Washington, DC 20001			Washingto	on, DC 20001		
3.	Date of filing/registration in Florida	4.	_		Document no	umber	
5. (a)	BUSINESS FILINGS INCORPORATED						
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 S Pine Island Rd						
	Registered Office Address (MUST BE FLORIDA STR	<u>EET ADDRE</u>	<u>(\$\$)</u>				
	Plantation	_, FL_33324			- -		
(b)	Corporate Creations Network Inc.				_	-	2023 DEC 14
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	stered Office	add	<u>ress</u> :		* *	
	801 US Highway 1					•	
	NEW Registered Office Address:				_		AH 10: 28
	North Palm Beach	_, FL_33408			_		ω
change agent v was/wo	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limit cre authorized by an affirmative vote of the membicles of organization or the operating agreement of	of the registe ted liability bers of the l	erec con imil	l office an apany, it is ed liabilit	d the business s hereby conf y company or	s office of irmed that	the registered the change(s)
	· · · · · · · · · · · · · · · · · · ·	Sa	ıray	Djidji, Att	orney in Fact		
-	ture of a member or authorized representative of a member				Printed or type		-
provisi the obl to mere	by accept the appointment as registered agent and ions of all statutes relative to the proper and compigations of my position as registered agent as properly reflect a change in the registered office address in writing of this change.	nlete perfor.	mar	ice of my a	duties, and Le	am familia.	r with and accept
	Saray Djidji, Special S	<u>Se</u> cretary					
Signatu	re of Registered Agent						