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## LLC REGISTERED AGENT CHANGE OTF PRODUCT SOURCING, LLC

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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	ame of the limited liability company: OTF PRODUC	CT SOUI	RCI	NG, LLC				
2. (	a)	6000 BROKEN SOUND PARKWAY NW, STE 200		(b	6000 BR	OKEN SOUND PARKWAY NW. STE 200			
,	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(0		Mailing address of (Note: MAY BE			•
		BOCA RATON, FL 33487			BOCA R	ATON, FL 33487	7		
		02/04/2019			M19000001	1271			
3.		Date of filing/registration in Florida	4.			Document nun	nber		
5.	(a)	PARACORP INCORPORATED							
٥.	,	Registered Agent and Registered Office shown on the records	of the Flo	nrida	Dept. of Stat	_ e:			
		155 Office Plaza Drive. 1st Floor							
		Registered Office Address (MUST BE FLORIDA STREE	T ADDR	ESS	<u> </u>	_			
		Tallahassee	FL_3230	ì		_	TALI:	1024 SEP 30	ಗವಷ್ಟ
(b)	b)	Corporate Creations Network Inc.						:P 30	1 E
		Enter name of NEW Registered Agent and/or NEW Register	ed Office	e add	ress:	_	SSE SSE	PH	
		801 US Highway 1					N S	<u>ၾ</u> မှ	O
		NEW Registered Office Address:				-	7	င်ခ	
		North Palm Beach		8		-			
						_			
char ager was	ige it w /we	mited liability company is not organized under the l or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he regist liability s of the	tered cor limi	d office and npany, it is ted liability	d the business o s hereby confirm y company or as	ffice of the ned that the	registe	red e(s)
/	See.	isten Espinales	ŀ	Crist	en Espinales	s, Attorney-in-Fa	ct		
Sig	gnati	ure of a member or authorized representative of a member	_			Printed or typed of	iame of signed	}	
nong	ieu	oy accept the appointment as registered agent and a cons of all statutes relative to the proper and complet gations of my position as registered agent as provid ty reflect a change in the registered office address, i in writing of this change.	gree to de le perfoi led for i l hereby	act i rmai n Ci e coi	n this capa nce of my a hapter 605, yfirm that t	acity. I further duties, and I am L.F.S. Or. if this the limited liabi	agree to con Jamiliar wi s document lity compan	nply w ith and is bein y has l	ith the accept g filed been
		aten Capinales c of Revisited Agent	Kristen	Esp	inales, Spo	ecial Secretary			