M19000001588

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/17/2023							
Name:	Merritt Wa	ker						
Reference #	1884	106						
			OVEMENT PRODUCTS LLC					
☐ Article	es of Incorporation/	'Authorization to Tra	ansact Business					
Amer	ndment							
✓ Chan	ge of Agent							
Reins	statement							
☐ Conv	Conversion							
☐ Merge	er							
Disso	lution/Withdrawal							
Fictitie	ous Name							
☐ Other								
Authorized A	Amount:	\$25						
Signature: _		mw						

+44 (0)20.3961.3080

ASIA PACIFIC HQ

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. N	ame of the limited liability company: TRANSFOR	WISKE	IONE IM	PROVENIENT	PRUL	10015	LLC
2. (a)	5407 Trillium Boulevard Suite B120	(b)	5407 Tril	llium Boulevar	d Suite	e B120	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			tailing address of lin (Note: MAY BE P	nited liab	ility comp	any:
	Hoffman Estates IL 60192		Hoffman	Estates IL 60		•	_
	Tiomidir Estates ie 00102	-		Editated IE do			<u>.</u>
	February 13, 2019	_	M	19000001588			
3.	Date of filing/registration in Florida	4.		Document numb	er		
5. (a)	CT Corporation System						
()	Registered Agent and Registered Office shown on the records of t	he Florida	Dept, of State	:			
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET)				202		
						ع ا	6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Plantation FL	33324			PATT ANASSTOR	2023 JAN 17	· <u></u>
(b)	COGENCY GLOBAL INC.				Vi i	AH 10: 43	ر الله الله الله الله الله الله الله الل
•	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:			Ö: F	1274
	115 North Calhoun St., Suite 4				1	ဃ	
	NEW Registered Office Address:						
	AND RESIDENCE VALUE AND						
	Tallahassee	32301					
	Tallatiassee						
the chagent was/w	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lic ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regis ibility co I the limi	tered office mpany, it is ted liability	and the business hereby confirmed company or as of	s office ed that t	of the re he chan	gistered ge(s)
/s/ L	uke Valentino	Luke	Valentino)			
Signa	iture of a member or authorized representative of a member			Printed or typed nar	me of sign	icc	
provis the ob to mei notifie	the accept the appointment as registered agent and agrifions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, 11 d in writing of this change.	ec to act performa I for in C iereby co	in this cape ince of my c hapter 605 nfirm that t	icity. I further as haies, and I am f , F.S. Or, if this the limited liabili	gree to c amiliar docume ty comp	comply with an with an ent is bei eany has	vith the d accept ng filed been

Timothy Mayville, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, Fl. 32314 FILING FEE: \$25.00

Signature of Registered Agent