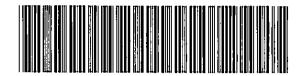
20000003700

(Requesto	r's Name)	_	
	(Address)			
((Address)			
	City/State	/Zip/Phone	#)	
PICK-UP		WAIT		MAIL
		-		
(Business	Entity Name))	
	Documen	t Number)		
Certified Copies		Certificates	of Status	
Certified Copies	-	Certificates	OF Status	<u> </u>
Special Instructions to	Filing Offi	cer:		
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				}

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 490679 8370632						
AUTHORIZATION CONTRACTOR						
COST LIMIT : \$25.00						
ORDER DATE : February 16, 2022						
ORDER TIME : 2:47 PM						
ORDER NO. : 490679-005						
CUSTOMER NO: 8370632						
CHANGE OF AGENT						
NAME: INNOVATION X MARKETING LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
COMMACE DEDCOM Alousia Mailand						
CONTACT PERSON: Alexxis Weiland						
EXAMINER'S INITIALS:						

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: INNOVATION X	MARK	ΕT	ING LLC					
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	,	-	Mailing address (Note: MAY	of limited	liability con	ipany;	
		34 S CRESCENT			34 S CRE	ESCENT				
		MAPLEWOOD, NJ 07040	_		MAPLEW	/OOD, NJ 07	DD, NJ 07040			
		04/14/2020	M2000003700							
3.		Date of filing/registration in Florida	4.			Document n	umber			
5.	(a)									
	()	Registered Agent and Registered Office shown on the records of t	he Florid	la I	Dept. of State	_ e:				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	7 ===	202		
		801 US HWY 1					2022 FEB			
		N PALM BEACH FL	33408			_	•	<u>a</u>		
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office Corporation Service Company			ress:	-		. ov		
		NEW Registered Office Address:				_				
		1201 Hays Street								
						_				
		Tallahassee, FL	32301			_				
cha age wa	inge ent w s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the less of organization.	s of the register bility co	e S red orr nit	office and pany, it is ed liability	d the busines s hereby conf y company or	s office o irmed tha	f the regis at the char	tered ge(s)	
	/s/	William L. Henderson	Wil	llia	m L. Hend	derson				
-5	ignat	ure of a member or authorized representative of a member				Printed or type	ed name of	signee		
pro the to i	ovisio obli nere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I had in writing of this change.	ee to ac perform! for in (ereby c	rt in Ian Ch Pon	this capa ice of my a apter 605 firm that t	acity. I furth duties, and I c . F.S. Or, if i the limited lid	er agree t am famili this docus ibility coi	to comply ar with an ment is be mpany has	with the ad accept ing filed been	
Si	malu.	re of Registered Agent								