## 10000003805

	(Requestor's Name)
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PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
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A. BUTLER OCT 1 4 2022



OCT 14 2022

CORPORATION SERVICE COMPANY

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

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		ACCOUNT NO.	:	I2000000195				
		REFERENCE	:	024016 8334108				
		AUTHORIZATION	:	Spellelenan				
		COST LIMIT	:					
ORDER I	DATE :	October 12, 2022						
		1:35 PM						
ORDER I	NO. :	024016-050						
CUSTOM	ER NO:	8334108						
<b>-</b>				·				
CHANGE OF AGENT								
	NAME:	MANA SAVES MC	ARTI	HUR, LLC				
DIDAGE	DEMIEN	THE TOTAL STATE A	55	OOR OF STITING				
PLEASE		THE FOLLOWING AS	PRO	ROOF OF FILING:				
	_	FIED COPY STAMPED COPY						
CONTACT	r person	N: Eyliena Baker						

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.

(a)	C/O M MANAGEMENT, INC.	(1	C/O M M/	ANAGEMENT, INC.		
. (a) .	Principal office address of limited liability company:		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  215 COLES ST			
	( <u>Note: MUST BE STREET ADDRESS</u> ) 215 COLES ST					
		<del></del>	JERSEY CITY, NJ 07310			
	JERSEY CITY, NJ 07310					
	04/20/2020		M20000003808			
	Date of filing/registration in Florida	4.		Document number		
(a)						
(a)	Registered Agent and Registered Office shown on the records of	Registered Agent and Registered Office shown on the records of the Florida Dept. of State				
	CHUNG, JAY					
	Registered Office Address (MUST BE FLORIDA STREET	TADDRES:	5)	-		
	318 NW 23 ST		_	20		
		2022 OCT 13				
	MIAMI	L				
				<u>-</u> ω		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ul Office ud	ldwa e	manager and the second		
	Effect frame of MAN Registered Agent and/or MAN Registere	eg Crince au	iuress.			
	Corporation Service Company	AM 8: 56 OF STATE				
	NEW Registered Office Address:					
	1201 Hays Street					
				-		
	Tallahassee	32301				
	I'	L				
inge ent w s/we	mited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members	e register iability co of the lim	ed office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
aru	cles of organization or the operating agreement of the oishe Mana		•	•		
			Moishe Mana, Authorized Person  Printed or typed name of signee			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President