

M200000004286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

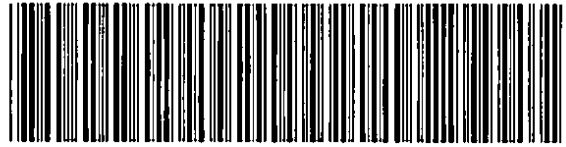
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JUL 13 2023

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**CORPORATE
ACCESS,
INC.**

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236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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CHANGE OF RA

1. **1K MUSEUM HOLDINGS LLC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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. Name of the limited liability company: 1K MUSEUM HOLDINGS LLC

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

c/o The One Legal, 345 Romano Avenue

CORAL GABLES, FL 33134

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

c/o The One Legal, 345 Romano Avenue

CORAL GABLES, FL 33134

08/05/2020

M20000007286

3. Date of filing/registration in Florida

4. Document number

5. (a) ELITE COMPANY MANAGEMENT LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

ELITE COMPANY MANAGEMENT LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2525 PONCE DE LEON BLVD. SUITE:300

CORAL GABLES, FL 33134

(b) Corporate Creations Network Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporate Creations Network Inc.

NEW Registered Office Address:

801 US Highway 1

North Palm Beach, FL 33408

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Kristen Fundaro

Kristen Fundaro

Signature of a member or authorized representative of a member

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.

/s/ Kristen Fundaro

Signature of Registered Agent

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

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TALLAHASSEE

FILED

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