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- **NAME:** ABSOLUTE AUTHORIZATIONS LLC
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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.

i)	33 Corporate Dr	Corporate Dr (b) 33 Corpora		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orangeburg, NY 10962		Oran	ngeburg, NY 10962
	04/12/2021		M2100	00004266
	Date of filing/registration in Florida	4.		Document number
i)	REGISTERED AGENT SOLUTIONS, INC.			
9	Registered Agent and Registered Office shown on the records of	the Florid	la Dept.	of State:
	2894 REMINGTON GREEN LANESUITE A			6 2
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>(S)</u>	
	TALLAHASSEE	32308		
Ե)	RIVERSIDE FILINGS LLC			
'	Enter name of NEW Registered Agent and/or NEW Registered Office addres			
	155 OFFICE PLAZA DRIVE. 1ST FLOOR			O
	NEW Registered Office Address:			
	TALLAHASSEE	32301		
ge V	imited liability company is not organized under the lator or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	e register ability c of the lir	ed offi ompany nited li	ice and the business office of the registered y, it is hereby confirmed that the change(s ability company or as otherwise provided
	/s/ Elliott Teitelbaum			Elliott Teitelbaum
ก่อเ	aire of a member or authorized representative of a member		-	Printed or typed name of signce

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/ Elliott Teitelbaum

Signature of Registered Agent

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