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((Requestor's Name)			
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PICK-UP	WAIT	MAIL		
((Business Entity Name)			
(Document Number)				
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Certified Copies	_ Certificates of S	status		
				
Special Instructions to	Filing Officer:			
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Office Use Only



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A. BUTLER OCT 1 4 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 024016 8334108					
AUTHORIZATION: Spelle Ran					
COST LIMIT : \$ 25.00					
ORDER DATE : October 12, 2022					
ORDER TIME : 1:34 PM					
ORDER NO. : 024016-049					
CUSTOMER NO: 8334108					
CHANGE OF AGENT					
NAME: MANA PUBLIC ARTS, LLC					
Maid. Main 100010 facto, fibe					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: 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.

1. N	ame of the limited liability company: MANA PUBLE	C ARTS,	LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	318 NW 23RD ST		888 NE	EWARK AVENUE
	MIAMI, FL 33127		JERSE	EY CITY, FL 07306
	09/13/2021		M21000	012083
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
5. (a)	Registered Agent and Registered Office shown on the records	of the Floric	Ja Dept. of S	State:
	CHUNG, JAY			207
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u></u>	2022 OCT
	318 NW 23RD ST			
	MIAMI	33127	•	
(b)				9: 50 8: 50
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office a	ddress:	
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	32301		
change	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited	ie register	red office	and the business office of the registered
was/w	ere authorized by an affirmative vote of the members icles of organization or the operating agreement of th	of the lir	nited liabi	lity company or as otherwise provided in
	loishe Mana	Mo	ishe Man	a, Authorized Person
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provide ely reflect a change in the registered office address, a d in writing of this change.	gree to ac le perform led for in I hereby c	t in this co nance of m Chapter 6 confirm the	apacity. I further agree to comply with the sy duties, and I am familiar with and accept 05, F.S. Or. if this document is being filed at the limited liability company has been
\mathcal{X}	race C-Kuble			
Piguatn	re of Registered Agent \			

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

Grace E. Kirby, Asst. Vice President