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(((H22000161500 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 : (214)317-4754 Fax Number

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(((H22000161500 3)))

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) _		/L \					
	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)	(0)	(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)				
	7925 NW 12TH STREET SUITE 109	79	25 NW 12TH STREE	12TH STREET SUITE 109			
	DORAL, FL 33126	D	ORAL, FL 33126				
	11/15/2021	M2	1000015389				
•	Date of filing/registration in Florida	- 4.	Document n	umber			
()							
. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dej	of of State				
	US LATAM CORPORATE SERVICES LLC						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)					
	1395 BRICKELL AVE STE 806						
	MIAMI	33131					
	, F	اب <u> </u>		<u> </u>	202		
/L\					H/	,	
(D)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addres	<u></u>		2022 MAY - 4	ي الله	
						APPROVED FILED	
	LEGALING CORPORATE SERVICES INC.	<u> </u>			PH	0,4	
	NEW Registered Office Address			<u> </u>	ယ့	€.	
	5237 SUMMERLIN COMMONS BLVD, SUITE 400			-,	$\frac{\omega}{\omega}$		
	FORT MYERS	33126					
	. F						
hange gent v vas/we	FORT MYERS imited 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 lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iws of the Sta e registered of iability comp of the limited	office and the busines any, it is hereby con I liability company o	ss office of the firmed that t	ne reg he cha	istored inge(s)	
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hange gent v vas/we he arti Signa I here provisi he obli o mere	imited 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 lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered compositive compositive compositive compositive compositive district disabilities and disabilities disabiliti	office and the busines any, it is hereby con I liability company of ity company, angelo Catapano Printed or typ this capacity: I furth	ss office of the firmed that t	ne reg he cha se pro	vided in	