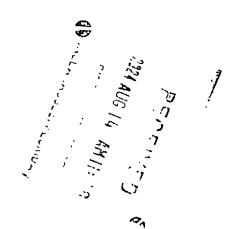
M22000005052

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions to	o Filing Officer:	
		J. HORNE AUG 15 2024

Office Use Only



400434692344



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE 576874 4358311
AUTHORIZATION CONTRACTOR AUTHORIZATION
AUTHORIZATION COST LIMIT : \$ 25.00
ORDER DATE : August 5, 2024
ORDER TIME : 4:54 PM
ORDER NO. : 576874-061
CUSTOMER NO: 4358311
CHANGE OF AGENT
NAME COMPLIC PACITON IIC
NAME: CENTRIC FASHION LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
FIELDS RETURN THE FOLLOWING AS FROOF OF FILLING.
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Amanda Miller
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	lame of the limited liability company: CENTRIC FAS	HION I	LC			
2. (a)	350 5TH AVE		(b)	350 5TH	H AVE	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	_ _	_	Idress of limited liability company: MAY BE POST OFFICE BOX)
	6TH FL			6TH FL		
	NEW YORK, NY 10118			NEW YO	ORK, NY	10118
	03/14/2022		ı	M220000	05052	
3.	Date of filing/registration in Florida	4.	_		Docume	ent number
5. (a	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD PLANTATION . F1		ESS)		ate:	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:	l Office	add	ress:	_	FILED 2024 AUG 14 PM 12:
	1201 Hays Street			_ 	_	9: 56
	Tallahassee FI	3230	1			<u>.</u>
chang agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	regist ability of the l	erec con imi	l office ar npany, it ted liabili	nd the bus is hereby ity compa	siness office of the registered confirmed that the change(s)
	/s/ Marc Goldfarb	<u>N</u>	larc	Goldfarb	*	
I here provis the object to men notific	ature of a member or authorized representative of a member who accept the appointment as registered agent and agricions of all statutes relative to the proper and complete obligations of my position as registered agent as provide rely reflect a change in the registered office address. It is in writing of this change. The of Registered Agent are of Registered Agent as provide acceptance. The control of Registered Agent are sident as the change are sident.	ree to a perfor d for in hereby	ict i mai i Ci coi	n this cap ice of my iapter 60 ifirm that	pacity. I f	or typed name of signee further agree to comply with the further agree to comply with the fund I am familiar with and accept by if this document is being filed by it is document in the second by it is document in the second by it is document in the second by it is document.

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

CSC 576874