## M22000006325

(Requestor's Name)					
(Address)					
(Address)					
(City	//State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					

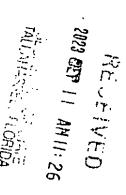
Office Use Only



500414354185

2023 SEP | | AM 10:

3 SEP 11 AN 10: 20



CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 974742 8426281

AUTHORIZATION: Spuritte man

COST LIMIT : \$ 25.00

-----

ORDER DATE: September 7, 2023

ORDER TIME : 8:52 AM

ORDER NO. : 974742-130

CUSTOMER NO: 8426281

-----

## CHANGE OF AGENT

NAME: GIA STRUCTURE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

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. Na	ame of the limited liability company:	IA STRUCTURI	E, LLC		
2. (a)	1221 BRICKELL AVE STE 900		(b) 1221 BRICKELL AVE STE 900		
()	Principal office address of limited liability (Note: MUST BE STREET ADDR.)		(0)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33131	·····		MIAMI, F	L 33131
	04/22/2022		ı	M2200000	6325
3.	Date of filing/registration in Flor	ida	4.	-	Document number
5. (a)	CT CORPORATION SYSTEM				
J. (u)	Registered Agent and Registered Office shown on 1200 S PINE ISLAND RD	the records of the	Florida	Dept. of Stat	e:
	Registered Office Address (MUST BE FLORI	DA STREET ADI	DRESS)		2023 SEP 11
	PLANTATION	, FL <sup>33</sup>	324		EP I
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NE	W Desistand Of	Goodd		1 AMID: 20
	1201 Hays Street	.w Registered On	nce aug	<u>1635</u> .	2023 SEP 11 AM 10: 20 TALLAHASSEL TI CAMA
	NEW Registered Office Address:				_
	1201 Hays Street				_
	Tallahassee	, FL	301		_
change agent v was/we	imited liability company is not organized or changes are made, the Florida street advill be identical. Or, in the case of a Florical authorized by an affirmative vote of the cles of organization or the operating agree	ldress of the reg Ia limited liabil e members of th	gistered ity con ne linni nited lin	l office an npany, it is ted liabilit ability con	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.
	nilo Salomon		Cam	ilo Salomo	
I herel provisi the obl to mere notified	we of a member or authorized representative of a now accept the appointment as registered agons of all statutes relative to the proper an igations of my position as registered agently reflect a change in the registered office I in writing of this change.  Wilard - Junson, MP The of Registered Agent	ent and agree t	to act i format ir in Ci eby coi	n this cape ace of my e apter 603 aftrm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been