Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

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Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:						
	Address:	Address:	Address:	Address:	Address:	Address:

REGISTERED AGENT CHANGE GRADUATE SERVICES MIAMI, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$35.00	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation of	0502, 607,1508, or 617,1508, Florida Statutes, this ganized under the laws of the State of FL gistered agent, or both, in the State of Florida.				
	the corporation: Graduate Servi	•				
	•	H STREET, UNIT 107, MIAMI, FL 33122				
3. The mailing a	address (if different): 7640 NW 2	5TH STREET, SUITE 107 MIAMI, FL 33122				
4. Date of incorporation/qualification: 06/30/2000 Document number: P00000064429						
	d street address of the current register rtment of State: (If resigned, enter res	ed agent and registered office on file with the gned)				
	7640 NW 25TH STREET, SUITE 107 MIAMI FL 33122					
7640 N.W. 25TH STREET, UNIT 107						
	MIAMI, FL 33122	Igent (if changed) and /or registered office \$\frac{1}{2} \frac{1}{2} \frac{1}				
	Corporate Creations Network Inc.					
	801 US Highway 1					
	PO.Box NOT acceptable North Palm Beach, FL 33408					
The street address changed will	ess of its registered office and the str be identical.	eet address of the business office of its registered agent.				
Such change was	as authorized by resolution duly ado he board, or the corporation has beer	oted by its board of directors or by an officer so notified in writing of the change.				
/s/ Caitlin Lazarus		Caitlin Lazarus, Attorney-in-Fact				
I hereby accept I further agree of my duties, an document is bei	to in other of ductor the appointment as registered agent to comply with the provisions of all i and accept the ing filed merely to reflect a change is seen notified in writing of this chan	And agree to act in this capacity. tatutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this a the registered office address, I hereby confirm that the ge.				
/s/ Caitlin Lazarus		11/29/2023				
Signature of Registered Agent		Date				
If signing on be	half of an entity:					
	is, Special Secretary					
	yped or Printed Name	UUU. \$35 00 ± ± ±				

* * * FILING FEE: \$35.00 * * *