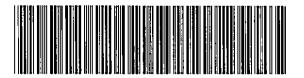
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Division of Corporations The Centre of Tallahassee		
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Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes. to n organized under the laws of the State of <mark>Florida</mark> r registered agent, or both, in the State of Florida.	his
1. The name of	the corporation: David Bierman, P	roial Raulaward Suita 201	
2. The principal	l office address: 3081 East Commer	ctar Bothevard Stiffe 204	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: March 200	7 Document number: P07000031455	
	d street address of the current regi- artment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	David Bierman		
	1776 N Pine Island Road Suite 102		
	Plantation, Florida 33322		
6. The name an (if changed):	-	red agent (if changed) and /or registered office	** <u>)</u>
	David Bierman		- 1 5 = 2
	3081 East Commercial Boulevard	204	
	· 	PO Box NOT acceptable	: <u>-</u>
	Fort Lauderdate, Florida 33308		
The street addr as changed wil	ess of its registered office and the	e street address of the business office of its register	ed agent.
Such change wauthorized by t	as authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	υ
/1		David Bierman, President	
Signati	ure of an officer or director	Printed or typed name and title	
I furthér agrée of my duties, a document is be	of the appointment as registered a to comply with the provisions of and I am familiar with and accept sing filed merely to reflect a chan as been notified in writing of this	gent and agree to act in this capacity, all statutes relative to the proper and complete per the obligation of my position as registered agent, ge in the registered office address. I hereby confirence change.	rformance Or, if this n that the
l.		04/20/2020	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
David Bierman.	, P.A.	_	
•	Typed or Printed Name	_	
	* * * F(L)	ING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)