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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Franmart Name of Corporation |
| DOCUMENT NUMBER: P2100073235 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Vincent Laszuadro Name of Contact Person Franmort Inc Firm/Company 33550 Galtocean Drive unitsos Address Fort Laucerclae ft, 33308 City/State and Zip Code VLoszuadro Ogmal. Com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Vincent Lasguadro at (212, 203-7714 Name of Contact Person Area Code & Daytime Telephone Number |
| |

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. |
|--|
| 1. The name of the corporation: Frankart 2. The principal office address: JSSO Galt Ocean Drive anitsos Fort Lauderdelle, Fl, 33308 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: $8/17/21$ Document number: $9/1000073$ |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) |
| Legalcorp Solutions LLC |
| 3440 W HOLLYWOOD BIND SUITELIS |
| Hollywood, FL 33021 Zz Z |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| VIVICENT LOS LOGIC |
| P.O. Box NOT acceptable |
| Fort Lauderdale FL, 33308 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. |
| Vin cent Losquedo CE O Signature of an officer or director Printed or typed name and title |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| 3 AS/2 d |
| Signature of Registered Agent Date |
| If signing on behalf of an entity: |
| Typed or Printed Name |

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