## P99000040375

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## COVER LETTER

TO: Registration Section Division of Corporations							
Brickell North Investments Inc.							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	matter to the following:						
Louise Jaffe							
Name of Person							
Midgard Management, Inc.							
Firm/Company							
1475 W. Cypress Creek Road, Suite 202							
Address							
Fort Lauderdale, FL. 33309							
City/State and Zip Code							
LJaffe@midgardmanagement.com							
E-mail address: (to be used for future annua	al report notification)						
For further information concerning this matter, p	lease call:						
Louise Jaffe	954 640.0233 at ( )						
Name of Person	Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following a	mount:						
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						

## 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.

I. Na	me of the limited liability company:		Bai	ckell.	1 Josth Snu. Sni
2. (a)	1475 W. Cypress Creek Road	(l	Same	•	•
s. (u) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (	,	_	ress of limited liability company: LAY BE POST OFFICE BOX)
	Suite 202				
	Fort Lauderdale, FL. 33309	_			
	05.04.1999		P990000	40375	
	Date of filing/registration in Florida	4.		Documer	nt number
. (a)	Cliff Hertz				
	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of S	tate:	
	Nelson Mullins Broad and Cassel				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u> </u>	<del></del>	
	One N. Clematis St. #500				
	West Palm Beach	33401			POLICE IN PHIO. 19
	, FL		<del></del>		報言れ
(b)					
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress:		
					The state of the s
	360 South Rosemary				
	NEW Registered Office Address:				5
	Suite 1410				
	West Palm Beach, FL	33401			·
hange gent v vas/we ne arti Signal	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law tare of a member or authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete the second co	register bility co f the lin limited  ce to accepterform	ed office company, in the liability control of	and the busit is hereby company.  One of the busit is hereby company.  Printed or apacity. I furney duties, and	ness office of the registered confirmed that the change(s) y or as otherwise provided in typed name of signee wither agree to comply with the d Lam familiar with and accept
he obl o mere	ins of an statutes, retains to the proper and empire pings igations of my position as registered agent as provided by reflect a change in the registered office address. I h I in writing of this change.	for in C ereby c	Chapter 6 onfirm the	05, F.S. Or at the limited	, if this document is being filed d liability company has been

Signature of Registered Agent