

L02000017227

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of this document.

((H14000151152 3)))



H140001511523ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NORTHWEST REGISTERED AGENT LLC
Account Number : I20090000081
Phone : (509) 768-2249
Fax Number : (855) 330-1010

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

Email Address: _____

RECEIVED

14 JUN 24 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE
CONCEPTO ESTRATEGICO, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN 24 AM 10:12

FILED

JUN 25 2014

C. CARROTHERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CONCEPTO ESTRATEGICO, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos Pineda

Name of Person

Firm/Company

Res Alameda Piso 6 Apto 6A Av 107C

Address

Urb Los Mangos Valencia, Carabobo 2001 VE

City/State and Zip Code

conceptoestrategico@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Pineda

Name of Person

at 58 412 8877715

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$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.

1. Name of the limited liability company: CONCEPTO ESTRATEGICO, LLC
2. (a) Av 107C Urb Los Mangos
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Res Alameda Piso 6 Apto 6A
Valencia, Carabobo 2001 VE
- (b) Av 107C Urb Los Mangos
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Res Alameda Piso 6 Apto 6A
Valencia, Carabobo 2001 VE
3. 07/10/2002 Date of filing/registration in Florida
4. L02000017227 Document number
5. (a) ACTIVEFILINGS, LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
10651 NE 11 COURT
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
MIAMI SHORES
FL 33138
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
REGISTERED AGENTS INC
NEW Registered Office Address:
3030 N. Rocky Point Drive, STE 150A
Tampa FL 33607

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Carlos Pineda

Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Dan Keen - President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00