107000094142

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



800299406348

05/31/17--01025--010 **25.00

SECRETARY OF STATE ALLAHASSEE FLORIDA

COVER LETTER

Division of Corporations
SUBJECT: TRON WORK DESIGN 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:
ADD/FO NAVARRO/YASE/NAVARRO
IRON WORW DESIGN LLC Firm/Company
3391 SW 15 th CT
FORTLANDENDALE FL 333/2 City/State and Zip Code
YASE/LO ACZ Wyahoo Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
YASFI LOPEZ at 954, 451-4047.
Name of Person 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

· INHS18 (2/14)

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. Na	me of the limited liability company: IRON WORK DESIGN LLC
2. (a)	5964 SW 43th STreet Davie (b) 5964 SW 43th Street DAVIC FI Principal office address of limited liability company: FL 33314 Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
3.	September 14, 2007 L0700094 142 Date of filing/registration in Florida / 4. Document number
5. (a)	ADOLFO NAVARRO ANA DORIS RAMIREZ Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
•	Fig. 5 W 43th Street DAVIE FL 33314 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	$\frac{1}{\sqrt{2}} \frac{1}{\sqrt{2}} \frac{1}{\sqrt{2}$
(b)	YASEL LOPEZ RAMIREZ VICE-PRESIDENT Enter name of NEW Registered Office address:
	NEW Registered Office Address:
the cha agent v was/wa	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
Signay	fure of a member of suthorized representative of a member Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Signatu	re of Registered Agent