L10000015824

(Requestor's Name)				
(Address)				
(Add	dress)			
(City	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu:	siness Entity Nam	e)		
(Document Number)				
Certified Copies		of Status		
Special Instructions to Filing Officer:				
	<u></u>			

Office Use Only



100235436621

06/01/12--01014--003 **25.00

T. CLISSE FLORE IN A 2012

EXAMINER

COVER LETTER

Division of Corp	oorations						
SUBJECT:	472	Fernw	ood Roa	d. LLC			
			Liability Co				
Done Sie en Madama			·				
Dear Sir or Madam:							
The enclosed Registere	d Agent/Registered (Office Cl	nange and f	ee(s) are submitted	d for filing.		
Please return all corresp	ondance concamine	thic mat	ter to the f	allowing:			
rease return an corresp	ondence concerning	, uns ma	ici to the n	mownig.			
·						•	
Fernan	do Redondo Sierra	.		·		′、	
	ame of Person	<u>'</u>					•
112	l Crandon Blvd.						
	irm/Company		·———				
	Ant = 406						
	Apt. E-406 Address						
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				رن خَرِ	3	Se
						声	,
	scayne, Fl 33149				至帝	200	
City/S	State and Zip Code				S.≹	\$20 20 1	
					SE SE		ر م م
redon	dor@hotmail.com				뜨유	Ì	j
E-mail address: (to be use	dor@hotmail.com ed for future annual report	notification)		FLC	7 6: C	
Co. 61 i. 6			11.		三五	•	
For further information	concerning this mat	ier, pieas	e can:			- AD	
Fernando Rec		_ at (787)	725-36			
Name of Pe	rson		Area C	ode & Daytime Telepho	ne Number		
STREET/COUR	IER ADDRESS:		MAILIN	G ADDRESS:			
Registration Secti				on Section			
Division of Corpo	rations			of Corporations			•
Clifton Building			P.O. Box				
2661 Executive C			Tallahass	ee, Florida 32314			
Tallahassee, Flori	da 32301				•		
Enclosed is a cl	neck for the following	ng amou	nt:				
 ✓ \$25 Filing Fe	e	Ţ.	\$55 Fili	ng Fee & Certified	d Copy		

TO: Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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 th	e limited liability company:	472 Fernwood Road, LLC			
2. (a) Princip	al office address of limited liability compan	y: 1121 Crandon Blvd. Apt. E-406			
(<u>Note:</u>	: MUST BE STREET ADDRESS	Key Biscayne, Florida 33149			
(b) Mailing address of limited liability company:		Same as above			
(Note:	: MAY BE POST OFFICE BOX)				
	7/19/2010	L10000075824			
3. Date of fili	ng/registration in Florida	4. Document number			
5. (a) Regist	ered Agent and Registered Office shown on				
Registe	ered Agent:	Jorge A. Fernandez, P.A.C.			
Registe	ered Office Address:	2600 Douglas Road, PHSC Coral Gables, Florida 33184			
(b) Enter n	name of <u>NEW Registered Agent</u> and/or <u>NE</u>				
	Registered Agent:	Fernando Redondo Siera			
NEW (MUS)	Registered Office Address: TBE FLORIDA STREET ADDRESS)	1121 Crandon Blvd. Apt. E-406 Key Biscayne ,FL33149			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the charge 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 bereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the imited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member					
Signature of a men	noer or authorized representative of a member				
Printed or typed na	Jorge A. Fernandez	_			
	\	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.			
Signature of Regis	stered Keeni				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					