## 114000087299

(Requestor's Name)							
(Address)							
(A	ddress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



100267510721

12/19/14--01018--001 \*\*35.00

下にこり 15 JAN 20 FN 年 01

LLC RACH

01/22/15



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 31, 2014

ALEJANDRINA SAA REDINGER 5807 NE 21ST AVE. FT. LAUDERDALE, FL 33308

SUBJECT: DIAMOND REAL ESTATE CONSULTING LLC

Ref. Number: L14000087299

We have received your document for DIAMOND REAL ESTATE CONSULTING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 014A00027558

## **COVER LETTER**

TO: Registration Section Division of Corporations									
SUBJECT: Diamond Real State Consulting LLC Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:									
Alejandrina Soon Redinger Name of Person	<u>(</u>								
Firm/Company									
4050 NE 613 Ave Address									
Oakland Park FL 33334 City/State and Zip Code									
isabel @ networldoverstock. Co E-mail address: (to be used for future annual repor	2m t notification)								
For further information concerning this matter, please ca	all:								
Alejandina Saá Redinger at (	303 ) 886 - SS2 5 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								
INHS18 (2/14)									

## TEMENT 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: Diamond	Ren	Estate	Consultin	is LL	^
2. (a	1) 4050 NE 6th Ave	(b)	4050	NE 6th	Ave	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailir	ng address of limite		
	0 1/1 1 5 11 501		A	<u>ne: MAT BE PUS</u> l > 1/	TUFFICE TI	<u> </u>
	Cakland Park FL		Bakland	1 YAVK	+4	
	33334		33334			
	05/30/14		1142	000 87 29.	o <sub>j</sub>	
3.	Date of filing/registration in Florida	4.		cument number	<u></u>	
<i>.</i>	Jun Ruit					
5. (	Registered Agent and Registered Office shown on the records of t	the Florida Dep	ot, of State:			
	3471 N Federal Hwy					
	Registered Office Address (MUST BE FLORIDA STREET -	IDDRESS)			<u></u>	
	Fort Lauderdale					ज
	r.	33306			Filtri Lati	
	FL	25500	<del>- 11:17:77</del>			26 F
<b>(</b> 1	) Alejandrina Saa Redi	NOW			•	
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
						t: 0
	NEW Registered Office Address:	<del></del>	<del></del>			<del></del>
	4050 NE 61 Ave					
	(0)0 (VC 6- HV)					
	Oakland Park FL	33334	1			
14° + In .	limited liability company is not organized under the law	un of the fie	of Florida	it ic baraby ao	infirmad ti	ngt ofter
the c	hange or changes are made, the Florida street address of	the registere	ed office and	i the business o	ffice of the	e registered
agen was/	will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members o	ability compa of the limited	any, it is her liability cor	reby confirmed mpany or as oth	that the ch erwise pro	iange(s) ovided in
	rticles of organization or the operating agreement of the				<u> </u>	
4	2000 CO	$\Box\Box\Box$			$\cup$	
•	nature of a member or authorized representative of a member	cauto vat in i		ited or typed name	•	de with the
prov	ely accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address. If	performance Hor in Char	rus capacity 2 of my dutie 2022 605 - F.S	es, and I am fan S. Or it this do	iliar with	and accept
to m	rely reflect a change in the registered office address. It ed in writing of the change.	tereby confir	m that the l	imited liability	company i	has been
ľ	Du a la Sun					
Sign	ture of Registered Agent					

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

15-