

L14000103200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

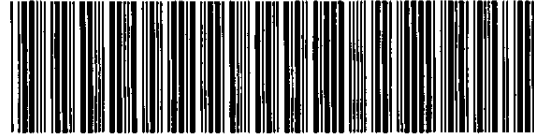
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAY 22 PM 2:00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015

T CANNON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 12, 2015

BLANCA LUNA
LUNA'S ACCOUNTING
1266 SW 115 WAY
DAVIE, FL 33325 US

SUBJECT: FUN BREAK LLC
Ref. Number: L14000103200

We have received your document for FUN BREAK 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).

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.

Tina D Cannon
Regulatory Specialist II

Letter Number: 115A00009897

RECEIVED
15 MAY 22 PM 3:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fun Break 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:

Blanca Luna
Name of Person

Luna's Accounting
Firm/Company

1266 SW 115 Way
Address

Davie FL, 33325
City/State and Zip Code

blan.ci@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Blanca Luna at (786) 2375255.
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

\$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: Fun Break LLC

2. (a) 114 Trent Shores Dr. New Bern NC, 28562 (b) 1266 SW. 115 Way Davie FL, 33325
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 06/27/2014 Date of filing/registration in Florida 4. 214000103200 Document number

5. (a) Domez Cesar
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
6904 44TH Terrace East Bradenton FL, 34203
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

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 TALLAHASSEE, FLORIDA
 15 MAY 22 PM 2:00

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Blanca Luna
 NEW Registered Office Address:
1266 SW. 115 Way

Davie, FL 33325

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.

Patricia Fuentes
 Signature of a member or authorized representative of a member

Patricia Fuentes, MGRM
 Printed or typed name of signee

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