L14000139348

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

Office Use Only



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COVER LETTER

	istration Section sion of Corporations					
SUBJECT:	101 NW 74 Street, LLC Name of Limited Liability Company					
SUBSECT.						
Dear Sir or M	Madam:					
The enclosed	d Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.			
Please return	all correspondence concerning	this matter to the	following:			
Benjamin Wo	olkov					
	Name of Person		_			
Caldera Law						
	Firm/Company					
7293 NW 2nd	i Ave					
	Address		_			
Miami, FL 33	3150					
	City/State and Zip Code	:	_			
jesse@calder						
E-mail	address: (to be used for future a	innual report notifi	ication)			
For further in	nformation concerning this matt	er, please call:				
Jesse Pottervo	eld	786 at (321-3811			
	Name of Person	\	Area Code & Daytime Telephone Number			
Reg Divi P.O	istration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Encl	losed is a check for the followi	ng amount:				
■ S2	25 Filing Fee	□ S5	☐ \$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.

2. (a)		(b)				
Principal office address	of limited liability company: ESTREET ADDRESS)		(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
7338 NW Miami Court						
Miami, FL 33150						
09/05/2014		Li	4000139348			
3. Date of filing/reg	gistration in Florida	4.	Document r	number		
5. (a)						
5. (a)Registered Agent and Registered	ed Office shown on the records	of the Florida De	ept. of State:			
AXS Law Group, PLLC						
Registered Office Address	MUST BE FLORIDA STREE	TADDRESS)				
2121 NW 2nd Ave, Suite 2	01					
Miami	,	33127		٠.		
-		rL		<u>.</u>	2022	
(b) Benjamin Wolkov				:	č.	
Enter name of NEW Registere	d Agent and/or NEW Register	red Office addre	<u>:ss</u> :	**	23	
Caldera Law				•		
NEW Registered Office Addre	ess:				<u> </u>	
7293 NW 2nd Ave		·			30	
Miami		FL 33150				
If the limited liability company is change or changes are made, the agent will be identical. Or, in the was/were authorized by an affirm the articles of organization or the	Florida street address of t case of a Florida limited native vote of the member	he registered of liability comp s of the limite	office and the busines bany, it is hereby con d liability company c	ss office of the firmed that the	registered change(s)	
Signature of a member or authorized representative of a member			Printed or typ	Printed or typed name of signee		
I hereby accept the appointment provisions of all statutes relative the obligations of my position as to merely referm a change in the notified in wytting of this change.	to the proper and comple registered agent as provic registered office address,	igree to act in te performanc ded for in Cha I hereby confi	this capacity. I further of my duties, and I opter 605, F.S. Or, if irm that the limited li	ner agree to cor am familiar wi this document ability compan	nply with th th and acce is being file y has been	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Signature of Registered Agent