## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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Division of Corporations

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## LLC REGISTERED AGENT CHANGE SOLERICO L.L.C.

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Corporate Filing Menu

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## **COVER LETTER**

	istration Section ision of Corporations				
SUBJECT:	SOLERICO L.L.C.				
,,, bob,,,,	Name of Limited Liability Company				
Dear Sir or I	Madam;				
The enclosed	d Registered Agent/Registered Of	fice Change	and fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to	the following:		
Cheyenne	e Moseley				
	Name of Person		· · · · · · · · · · · · · · · · · · ·		
Legalzoor	m.com, Inc.				
<del>-</del>	Firm/Company		<del></del>		
101 N. Bra	and Blvd., 10th Floor				
	Address				
Glendale,	CA 91203				
	City/State and Zip Code				
onlinefiling	gs@legalzoom.com				
E-mail	address: (to be used for future and	nual report n	otification)		
For further i	information concerning this matter	, please call:			
Cheyenne	Moseley	800 at (	773-0888 ext9724		
	Name of Person	··· \	Area Code & Daytime Telephone Number		
Reg Divi Clif 266	REET/COURIER ADDRESS: istration Section ision of Corporations ion Building 1 Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enc	losed is a check for the following	g amount:			
□ \$	25 Filing Fee	Z	\$55 Filing Fee & Certified Copy		

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: SOLERICO L	L.C.		and the many of the second state of the second state of the second secon	entropologica de la colonia de	M1 = 1 + 1 + 1 + 1 + 1
-	(**)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		1	Mailing address of limited lia (Note: MAY BE POST O	ability con	npany:
		900 BISCAYNE BLVD. #3709		900 BIS	CAYNE BLVD. #37	09	
		MIAMI, FL 33132	· ·	MIAMI,	FL 33132		rak Madelina Phinippy Winterd
		08/20/2015		L1500014	43111		
3.		Date of filing/registration in Florida	4.		Document number		<del></del>
5	(a)						
J.	(a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept, of State	<del>-</del> e:		
		INTERNATIONAL CORPORATE SERVICE					
		Registered Office Address (MUST RE FLORIDA STREET ADDRESS)			_	<del>1</del> 6	
	2600 S DOUGLAS RD., SUITE 913				i and	On C	
		CORAL GABLES , FI.	33134	1-6142	FACE SEE		314.1
	/h)				CO - PR PT PT	<b></b>	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:						A O	particus;
		UNITED STATES CORPORATION AGENT					
		NEW Registered Office Address:			-		
13302 WINDING OAK COURT, SUITE A							
		TAMPA	33612	2			
the age wa the	cha sot v s/we arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of class of organization or the operating agreement of the	ws of the the reg ability of the hi limited	e State of Fk distered office company, it is mited liability liability con	orida, it is hereby confine and the business offices hereby confirmed that y company or as otherwingany.  ICO RESTREPO	e of the t the cha vise prov	registered nge(s)
_	-	ture of a member owntilling to the presentative of a member			Printed or typed name of si	_	
prothe to a	iere visi obl mer ifie	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide By reflect a change in the registered office address, I I'm scriting of this change.			acity. I further agree to duties, and I am famille 5, F.S. Or, if this docum the limited liability com	o comply ar with 6 uent is b upany he	y with the nid accept wing filed as been
		CHEYENNE MOSELEY, ASSISTANT S REHALF OF UNITED STATES CORPO					
Sig	natu	re of Registered Agent					