

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L15000147382

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ORANGE BUSINESS SOLUTIONS INC
Account Number : I20210000133
Phone : (305)417-9919
Fax Number : (305)938-8087

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT CHANGE
ZAMORA 1009 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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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: ZAMORA 1009 LLC
2. (a) 5401 COLLINS AVE APT 1009, MIAMI BEACH, FL. 3314
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
- (b) 5401 COLLINS AVE APT 1009, MIAMI BEACH, FL.
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 09/02/2015 Date of filing/registration in Florida
4. L15000147382 Document number

5. (a) ORANGE BUSINESS SOLUTIONS INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1444 BISCAYNE BLVD STE 212

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MIAMI, FL 33137

- (b) ORANGE BUSINESS SOLUTIONS INC

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

2100 CORAL WAY PH704

NEW Registered Office Address:

MIAMI, FL 33145

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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.

Maria Ofelia Coca
18506176383 10-42

MARIA OFELIA COCA

Signature of a member or authorized representative of a member

Printed or typed name of signer

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 of Registered Agent

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