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OCT 1 3 2016 Y SUN KETT

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	1ST NW 42ND AVE. LLC					
		Name of Limited Liability Company				
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	ice Change ar	nd fee(s) are submitted for filing.			
Please	e return all correspondence concerning th	is matter to th	e following:			
IVON	NE NUNEZ		·			
	Name of Person					
	IVONDAJUNEZ					
	Firm/Company					
1225	0 SW 39TH TER					
	Address					
MIAN	/II FL, 33175					
	City/State and Zip Code					
deys	si.cain@gmail.com/ reycecil@ho	tmail.com				
	E-mail address: (to be used for future and	nual report not	ification)			
For fu	rther information concerning this matter	, please call:				
DEY	SSI CAIN	818	970-5085			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:	N	MAILING ADDRESS:			
	Registration Section		Registration Section			
	Division of Corporations		Division of Corporations			
	Clifton Building		P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301	J	Fallahassee, Florida 32314			
	Enclosed is a check for the following	g amount:	Silver Si			
	■ \$25 Filing Fee		\$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. N	ame of the limited liability company: 1ST NW 42	ND AVE. LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 117 NW 42ND AVE #CU-1	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33126		
	09/03/2015	L150001	150880
3.5. (a)			Document number
	Registered Agent and Registered Office shown on the records of	ate:	
	Registered Office Address (MUST BE FLORIDA STREET 5237 SUMMERLIN COMMONS SUITE 40	_	
	FORT MYERS , F	_L 33907	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	16 OCT	
	NEW Registered Office Address:		
	12250 SW 39TH TER		
	MIAMI, F	_{L_} 33175	
the chagent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the second success.	of the registered offi- liability company, it of the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet ligations of my position as registered agent as provid rely reflect a change in the registered office address, and in writing of this change.	gree to act in this ca te performance of m led for in Chapter 60 I hereby confirm tha	· ·
Signat	TVONNE NUMEZ ure of Registered Agent		