L15000 177911

| (Requestor's Name) | | | | |
|---|-------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | y/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
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COVER LETTER

| TO: Registration Section Division of Corporations | | | | | | |
|--|---|--|--|--|--|--|
| 1428, LLC SUBJECT: | | | | | | |
| Name of Limited Liability Company | | | | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed Registered Agent/Registered Office C | Change and fee(s) are submitted for filing. | | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | | |
| Sam Wise | | | | | | |
| Name of Person | | | | | | |
| 1428, LLC | | | | | | |
| Firm/Company | . | | | | | |
| 401 NW 73rd Ter | , | | | | | |
| Address | | | | | | |
| Hollywood, FL 33024 | <u>:</u> | | | | | |
| City/State and Zip Code | | | | | | |
| samwise21@live.com | | | | | | |
| E-mail address: (to be used for future annual r | report notification) | | | | | |
| For further information concerning this matter, plea | se call: | | | | | |
| Sam Wise | 954 205 2782 | | | | | |
| 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 amo | ount: | | | | | |
| □ \$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: 1428, LLC | | | | |
|-----------------------------------|---|---|--|---|--|
| 2. (a) | 1428, LLC | | (b) 1428, LLC | | |
| (, | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | · - | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | 401 NW 73rd Ter | | 401 NW | 73rd Ter | |
| | Hollywood, FL 33024 | | Hollywo | od, FL 33024 | |
| | 10/20/2015 | | L1500017 | <i>7</i> 7911 | |
| 3. | Date of filing/registration in Florida | 4. | | Document number | |
| 5. (a) | | | | | |
| J. (a) | Registered Agent and Registered Office shown on the records of | the Flor | da Dept. of State | - e: | |
| | Alejandra Hassan | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | - | | |
| | 8362 Pines Blvd 480 | | | | |
| | Pembroke Pines | 3302 | 4 | - | |
| | , ri | '— — | | | |
| (b) | | | | | |
| . , | Enter name of NEW Registered Agent and/or NEW Registered | l Office | address: | · | |
| | O \M/ | | | | |
| | Sam Wise | | | <u>.</u> : | |
| | NEW Registered Office Address: | | | | |
| | 401 NW 73rd Ter | | | <u>.</u> | |
| | Hollywood | _3302 [,] | 4 | | |
| the cha agent was/w the art | limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the member of a member or authorized representative of a member | f the repaility of the limited | gistered office company, it is mited liabilit | c and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in | |
| provisi the obj to mer | by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I din writing of this change. | ree to a perfor ed for in hereby | ct in this cap mance of my Chapter 605 confirm that | acity. I further agree to comply with the duties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been | |

Signature of Registered Agent