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COVER LETTER

10:	Division of Corporations	
SUBJI	ECT: <u>Stanse To</u>	a LLC ted Liability Company
		ted Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter t	o the following:
	Seyundo N. Perez Murales	
	Name of Person	
	Firm/Company	
	365 Deee Ridge Circle Address	
	Hauana, Flevida 32333 City/State and Zip Code	
	Sejustan 11c a amail. cor E-mail address: (to be used for future annual report	<u>r)</u> notification)
For fur	rther information concerning this matter, please ca	П:
	Dequendo A. Penez Morales at (9)	Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount:	
	□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHST	8 (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: Stanseja
7 (0)	345 Deer Ridge Circles (b)
2. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Hauana, florida 32333
	September 9, 2016 L1400148468 Date of filing/registration in Florida 4. Document number
3.	
5. (a)	Carmona Law, PA
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	7457 aloma Quenue, Sinte 201
(b)	Segundo A. Perez Moralls
(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	365 Deep Ridge Circle
	NEW Registered Office Address:
	Hauana _{FL} 32333
10 1 1	
change agent w was/we	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cless of organization or the operating agreement of the limited liability company.
	Seaund A. Pewer Morales
//	
provision the oblination to mere notified	A accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed live reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Signatur	re of the cupie red Agent
	Bivision of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00