

L17000140253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

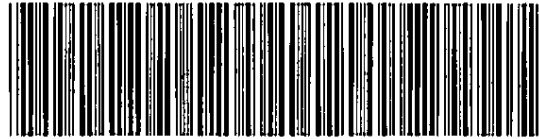
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

OCT 10 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Alma Motors LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anamarie Murillo
Name of Person
Alma Motors LLC
Firm/Company
602 NW 119th St.
Address
Miami Florida 33168
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anamarie Murillo at (845) 549-7050
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Alma Motors LLC
2. (a) 663 NW 119th St Miami FL 33188
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
(b) 662 NW 119th St Miami FL 33168
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 06/28/2017 Date of filing/registration in Florida
4. 576000778600 Document number

5. (a) Dzenan Palavra
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4601 NE 88th St
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
E1 Portal, FL 33138

(b) Anamarie Murillo
Enter name of NEW Registered Agent and/or NEW Registered Office address:
662 NW 119th St
NEW Registered Office Address:
Miami, FL 33168

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TALLAHASSEE, FL

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.

Anamarie Murillo
Signature of a member or authorized representative of a member
Anamarie Murillo
Printed or typed name of signee

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