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OUT 1 TO THE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Monederu LLC	<u> </u>			
Name of Lim	ited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
Maria Jimena Quan				
Name of Person				
Monederu LLC				
Firm/Company				
45 SW 9th St. #3507				
Address	-			
Miami, 33130				
City/State and Zip Code				
jimena@monederu.com E-mail address: (to be used for future annual repor	t notification)			
For further information concerning this matter, please co	all:			
Maria Jimena Quan at (41	2 3549441			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following amount	:			
□ \$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.

l. Na	ime of the limited liability company: Monederu	<u>LL</u>	ر	. <u>.</u> .	<u> </u>		<u> </u>
2. (a)	Monederu LLC	(b) Monederu LLC					
	Principal office address of limited liability company:			lailing address of limit			Ì
	(Note: MUST BE STREET ADDRESS) 45 SW 9th St. #3507		45 C\A/	9th St. #3507		ע	
	45 5 VV 9th St. #3507		45 5 VV	9th St. #3507			1
	Miami, FL 33130		Miami, F	_ 33130			
	09/15/2017		L170001	92218			
3.	Date of filing/registration in Florida	4.	-	Document number			
5. (a)	UNITED STATES CORPORATION AGENTS.	INC.					
J. ()	Registered Agent and Registered Office shown on the records of the	Florida	Dept. of State	:			
	UNITED STATES CORPORATION AG	ENT	S, INC.				
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS	2			، مجز	ļ. •
	5575 S. SEMORAN BLVD SUITE 36					, ,	<u>.</u> 1.
	Orlando 127 3	2822)			- -	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
	, P.L					H S S F F	•
(p)	Registered Agents Inc.						İ
. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Mice ad	dress:			- ·	ļ.
	Registered Agents Inc.					::	
	NEW Registered Office Address:					`>-	
	7901 4th St N STE 300						
	St. Petersburg	3702	<u> </u>				
the cha agent v was/w the art Signa I here proviss the obi to mer notitie	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabore of a member or authorized representative of a member by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete polications of my position as registered agent as provided all reflect a change in the registered office address, I he directions of this change.	ne reginitive of the limited l	stered office ompany, it is ited liability com MARIA	and the business of hereby confirmed company or as off pany. Printed or typed name active. I further agriculty.	of signee	gistered e(s) ed in	生
<u> </u>	Bill Havre - Assistant :	Secre	tary				

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

INHS18 (2/14)