

L1900004264

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : USA CORPORATE SERVICES GROUP
Account Number : I20150000041
Phone : (954)303-2957
Fax Number : (888)757-7949

FILED
2019 JAN 14 AM 11:09
T. CLINE

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE
VICONAYA CONSULTANTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T. CLINE
JAN 15 2019
EXAMINER

2019 JAN 14 11:09:05

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: VICONAYA CONSULTANTS LLC

2. (a) PRINCIPAL OFFICE ADDRESS (b) _____

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

4775 COLLINS AVENUE, SUITE 908

MIAMI BEACH, FL 33140

01/07/2019

3. Date of filing/registration in Florida 4. Document number

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

USA CORPORATE SERVICES GROUP, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7392 NW 35 TERRACE, SUITE 207

MIAMI, FL 33122

(b) ALICIA VILLACORTA

Enter name of NEW Registered Agent and/or NEW Registered Office address:

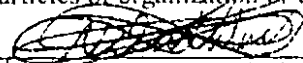
NEW Registered Office Address:

4775 COLLINS AVENUE, SUITE 908

MIAMI BEACH, FL 33140

2019 JAN 14 AM 11:09
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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.


Signature of a member or authorized representative of a member

Nelson Medina
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