## L20000012641

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE			
	Na	me of Limited Lia	ibility Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Of	fice Change and I	ee(s) are submitted for filing.
Please	return all correspondence concerning the	nis matter to the fo	ollowing:
OMAR	GONZALEZ NUNCIO		
	Name of Person	· · · · · · · · · · · · · · · · · · ·	_
FLATII	RON 2211, LLC		
	Firm/Company		_
218 SE	14TH ST. PH3		
	Address		_
MIAM	I, FL 33131		
	City/State and Zip Code		_
sotogor	mez22@yahoo.com		
E	-mail address: (to be used for future an	nual report notific	cation)
For fur	ther information concerning this matter	r, please call:	
OMAR	GONZALEZ NUNCIO	832 at (	372-1513
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the followin	g amount:	
	■ \$25 Filing Fee	<b>□</b> \$5	5 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.

Na	ime of the limited liability company: FLATIRON 2211.	LLC		
(a)	218 SE 14TH ST. PH3, MIAMI, FL 33131	_	(b) 218 SE	14TH ST. PH3, MIAMI, FL 33131
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	01/06/2020	-	L2000001	
	Date of filing/registration in Florida	4.		Document number
(a)	Registered Agent and Registered Office shown on the records of the PEDRO TOPETE VARGAS	he Flor	da Dept. of S	tate:
	Registered Office Address 218 SE 14TH ST. PH3	(DDRE	<u>SS)</u>	E IL 2020 SEP 25
	MIAMI , FL	33131		2 N
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  OMAR GONZALEZ NUNCIO			PM 2: 39 OF STATE SSEE, FEL
	NEW Registered Office Address:	·		<del></del>
	FL_			
ange ent v is/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of ples of organization or the operating agreement of the	registe bility f the I limited	ered office a company, il imited liabi I liability co	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
Ψ	resident longers Millars	G 	RISELDA O	). VARGAS DE WILLARS
	ture of a member or authorized refresentative of a member by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address. In all in writing of this change.	ee to a perfor I for it ereby	ct in this co mance of m Chapter 6 confirm the	Printed or typed name of signce ipacity. I further agree to comply with the values, and I am familiar with and acce, 05, F.S. Or, if this document is being file at the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Signature of Registered Agent