

L21000072305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

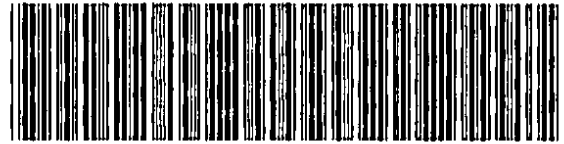
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100397351871

11/10/22 -01005--017 **25.00

2022 NOV 10 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BPO SUSTAINABLE HABITAT LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORBERTO PERALTA
Name of Person

BPO SUSTAINABLE HABITAT LLC
Firm/Company

5750 COLLINS AVE UNIT 8E
Address

MIAMI BEACH FL 33140
City/State and Zip Code

SIMONE_FERNANDES2012@ICLOUD.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SIMONE VARGAS FERNANDES 386 627-9357
Name of Person at () 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

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: BPO SUSTAINABLE HABITAT LLC

2. (a) 5750 COLLINS AVE UNIT 8E (b) 5750 COLLINS AVE UNIT 5E

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)
Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

3. 02/11/2021 4. L21000072305

Date of filing/registration in Florida Document number

5. (a) NORBERTO PERALTA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5750 COLLINS AVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

UNIT 8E

MIAMI BEACH, FL 33140

(b) SIMONE VARGAS FERNANDES

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

5750 COLLINS AVE

NEW Registered Office Address:

UNIT 8E

MIAMI BEACH, FL 33140

FILED
2022 FEB 10 PM 12:30
SECRETARY OF STATE
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.

 NORBERTO PERALTA
Signature of a member or authorized representative of a member 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