

5/3/23, 10:41 AM

Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To:

Division of Corporations  
 Fax Number : (850)617-6383

From:

Account Name : MONAHAN MIJARES CPA PA  
 Account Number : I20050000157  
 Phone : (305)407-1438  
 Fax Number : (305)397-1003

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

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**LLC REGISTERED AGENT CHANGE  
 CONSULTING RD LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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**T. LEMIEUX**  
**MAY 04 2023**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CONSULTING RD 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:

Rafael G. Nunez  
Name of Person

Firm/Company

945 Meridian Av Apt 1  
Address

Miami Beach, Florida, 33139  
City/State and Zip Code

ragnuma@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rafael G, Nunez at (305) 903-7260  
Name of Person 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: CONSULTING RD LLC

2. (a) <u>945 Meridian Av</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>Apt 1</u> <u>Miami Beach Florida 33139</u> <u>11/16/2021</u>	(b) <u>945 Meridian Av</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>Apt 1</u> <u>Miami Beach Florida 33139</u> <u>L21000492572</u>
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3. Date of filing/registration in Florida 4. Document number

5. (a) MONAHAN, ROARK R  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
75 VALENCIA AVE  
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
SUITE 703  
CORAL GABLES, FL 33134

(b) Rafael G Nunez  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
945 Meridian Av  
NEW Registered Office Address:  
Apt 1  
Miami Beach, FL 33139

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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] Rafael G Nunez  
 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]  
Signature of Registered Agent