

L06000085946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUL -6 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUL 09 2012  
EXAMINER

July 3, 2012.

Florida Department of State  
Division of Corporations  
P.O. Box 6327,  
TALLAHASSEE, FL., 32314.

REF.: BUENA VISTA MUSIC, LLC  
#L06000085946

Dear Sirs:

Reference is made to your letter dated June 4, 2012, in which you returned the form "Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company", in order to be corrected.

As requested, please find the corrected form along with a copy of your letter as per your request.

Apparently you kept our check in the amount of \$25.00, presumably to wait for our reply.

Sincerely

BUENA VISTA MUSIC, LLC.



Marieba Moreno  
Registered Agent

FILED  
12 JUL -6 PM 3:20  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 4, 2012

MARIELA MORENO  
P.O. BOX 403746  
MIAMI BEACH, FL 33140

SUBJECT: BUENA VISTA MUSIC, LLC.  
Ref. Number: L06000085946

We have received your document for BUENA VISTA MUSIC, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 412A00015813

FILED  
12 JUL -8 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BUENA VISTA MUSIC, 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:

MARIELA MORENO

Name of Person

BUENA VISTA MUSIC, LLC

Firm/Company

10225 Collins Avenue, Suite #603,

Address

BAL HARBOUR, FL., 33154.

City/State and Zip Code

victoriamiami@hotmail.com

E-mail address: (to be used for future annual report notification)

FILED  
12 JUN -6 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARIELA MORENO

Name of Person

at ( 786 )

352-1022

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**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 608.416 or 608.508, 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: BUENA VISTA MUSIC, LLC

2. (a) Principal office address of limited liability company: 1200 Brickell Avenue, 18th Floor

**(Note: MUST BE STREET ADDRESS)**

MIAMI, FL., 33131

(b) Mailing address of limited liability company: 1200 Brickell Avenue, 18th Floor

**(Note: MAY BE POST OFFICE BOX)**

MIAMI, FL., 33131

08/30/2006

L06000085946

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:

Registered Agent:

MARIELA MORENO

Registered Office Address:

10225 Collins Avenue, Suite #603  
BAL HARBOUR, FL., 33154

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

MARIELA MORENO

**NEW** Registered Office Address:

10225 Collins Avenue, Suite #603

**(MUST BE FLORIDA STREET ADDRESS)**

BAL HARBOUR, FL 33154

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

MARIELA MORENO

Printed or typed name of signer

*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 608, 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

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

**FILING FEE: \$25.00**