## 108000018641

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☐ WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certificate	s of Status	
Special Instructions to Filing Officer:		
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B. BOSTICK

MAR 2 4 2014

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: 900 PETAIL 103, Name of Limited I			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	ter to the following:		
JOSE F RENA Name of Person			
900 DETAK 103, LCC Firm/Company	<del></del>		
900 BISCAYNE BLUD A	4/05		
MIATI FZ 33/32 City/State and Zip Code	H III 20		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
JOSE F- YENA at (3) Name of Person	OS 32/- 9865 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		

INHS18 (12/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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:900	RETAIL 103, LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	: 900 BISCATINE BLUD 410S 11 AM / FL 33/32
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME AS PROVE
02/2/2008	208000018641
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	•
Registered Agent:	PRIVE CONSULTING GROW
Registered Office Address:	900 BISCAYTE BLUD #10-
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	W Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	900 BISCAYNE BLUD \$105 MI ADTI FL 33/30
If the limited liability company is not organized under the lonfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Mary 1/2 Mary 1/2  Printed or typed name of signee  I hereby accept the appointment as registered agent and a	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my po Chapter 605, IS. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered Agent	oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Division of Corporations, P.O. Box 63	27. Tallahassee, FL 32314

FILING FEE: \$25.00



February 5, 2014

JOSE F. PENA 900 RETAIL 102, LLC 1395 BRICKELL AVENUE #3301 MIAMI, FL 33131

SUBJECT: 900 RETAIL 103, LLC Ref. Number: L08000018641

We have received your document for 900 RETAIL 103, LLC and your check(s) totaling \$470.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Barbara Bostick Regulatory Specialist II

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Letter Number: 314A00002672