L13000151494

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	e)			
(Do	ocument Number)				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

JUL 18 2016 RIS

COVER LETTER

TO: Registration Section Division of Corporations

PRODUCTION SUPPORT S SUBJECT:	SERVICES	LLC	
	e of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	ce Change an	nd fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the	e following:	
JOSE L BOTA			
Name of Person			
PRODUCTION SUPPORT SERVICES	LLC		
Firm/Company			
2274 NE 136TH TERR			
Address			
NORTH MIAMI BEACH FL 33181			
City/State and Zip Code			
JOSE@PRODSUPPORTSERVICES.N	ET		
E-mail address: (to be used for future annu	ual report not	tification)	
For further information concerning this matter,	please call:		
JOSE L BOTA	786 at (346-2843	
Name of Person		Area Code & Daytime Telephone Nur	nber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314	
Enclosed is a check for the following	amount:		
\$25 Filing Fee	- :	\$55 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.

n naa Na	PRODUCTION me of the limited liability company:	N SUF	PPORT SE	ERVICES LLC	
	2274 NE 136TH TERR	_ (b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) NORTH MIAMI BEACH FL 33181			Mailing address of limited lia (Note: MAY BE POST O	
	10/28/2013	******	L130001	51494	
(a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document number	
(4)	Registered Agent and Registered Office shown on the records of 2711 VENTERVILLE RD.			- e: -	
	Registered Office Address (MUST BE FLORIDA STREET.	<u>ADDRES</u>	<u>S)</u>		
	WILMINGTON , FL	19808		SEGRE TALLAH	5
(b)	JOSE L BOTA			ASS SSS	PARTY OF THE PROPERTY OF THE P
()	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>ldress</u> :		R M
	2274 NE 136TH TERR			LORII	1: 36
	NEW Registered Office Address:			- Di	J .
	NORTH MIAMI BEACH	33181		_	
cha nt w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of the operating agreement of the	f the reg ability of of the lin	istered offic ompany, it i nited liabilit liability cor	e and the business offic is hereby confirmed that ty company or as othery	e of the registe t the change(s)
ignat	ure of a member or anthorized representative of a member	-		Printed or typed name of s	ignee
visi obk nere	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to ac perforn d for in hereby c	t in this cap nance of my Chapter 60. confirm that	acity. I further agree to duties, and I am familio 5, F.S. Or, if this docun the limited liability con	o comply with t ar with and acc nent is being fil npany has been
Signat Signat I herel provisi he oble o mere	ure of a member or authorized representative of a member by accept the appointment as registered agent and agents of all statutes relative to the proper and complete in a statute of a member one of all statutes relative to the proper and complete in a statute of a provide it as a provi	limited	liability cor	Printed or typed name of s	igno

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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