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2017 JUN 13 PM 3: 22 SECRETARY OF STATE

K. SALY JUN 1 4 2017

COVER LETTER

	ision of Corporations							
SUBJECT:	HEAVY EQUIPMENT & PA	RTS EXPORT	CO., LLC					
SODJEC1.	Name of Limited Liability Company							
Dear Sir or	Madam:							
The enclose	d Registered Agent/Registered Off	ice Change and fe	ee(s) are submitted for filing.					
Please retur	n all correspondence concerning th	is matter to the fo	llowing:					
JEANNE	FUENTES LOPEZ							
	Name of Person		-					
FOWLER	WHITE BURNETT, P.A.							
	Firm/Company		-					
1395 BRI	CKELL AVENUE, SUITE # 14	100	_					
	Address							
MIAMI, FI	LORIDA 33131							
	City/State and Zip Code		-					
JFUENTE	ES-LOPEZ@FOWLER-WHITI	E.COM						
E-mai	address: (to be used for future ann	ual report notification	ation)					
For further i	information concerning this matter,	please call:						
JEANNE	FUENTES LOPEZ	305	789-9269					
-	Name of Person		Area Code & Daytime Telephone Number					
Reg Div Clif 266	REET/COURIER ADDRESS: distration Section ision of Corporations fron Building 1 Executive Center Circle lahassee, Florida 32301	Regi Divis P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:								
Z 2 \$	25 Filing Fee	□ \$55	Filing Fee & Certified Copy					
INHS18 (2/1	4)							

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.	Na	me of the limited liability company: HEAVY EQUIF	PMEN		& PART	S EXPORT CO., LLC
۷.	(=)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	-,_	M	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		8236 NW 30th Terrace		F	о вох	524294
		Doral, Florida 33122	-	1	Иіаті, F	lorida 33152
		02/14/2007		L	0700001	7109
3.		Date of filing/registration in Florida	4.			Document number
5	(a)					
٥.	(4)	Registered Agent and Registered Office shown on the records of th	e Florid	a D	ept. of State	:
		Corporate Management Inc				4 8
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS	S)		Fig E m
		16321 SW 78th Terrace				ECAHASSA TIL
		Miami , FL 3	33193	}		2017 JUN 13 PH 3: 22 TALLAHASSEE, FLORID
			-			PH 3: 23 SEE. FLORID
	(b)	b) Enter name of NEW Registered Agent and/or NEW Registered O		 		3: 2 LOR
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	<u>ldre</u>	: <u>ss</u> :	Dri M
		NEW Registered Office Address:				
		1395 Brickell Avenue, Suite # 1400 (JFL)				
		Miami , FL 3	33131			
the age	cha ent v .s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of ti vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	s of the he regi oility co the lin mited	e St iste om nite lial	ate of Flo red office pany, it is d liability bility com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
<u>-</u>	Signat	ure of alphember or authorized representative of a member				Printed or typed name of signee
I h pro the to no	nerel ovisi obl mere tified	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p ignations of my position as registered agent as provided by reflect a change in the registered office address, I he hin writing afthis change.	e to ac erform for in (ereby c	et in nan Che conj	this capa ce of my a apter 605, irm that t	icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Sig	gnatu	e p Registered Agent				