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## COVER LETTER

TO: Registration Section Division of Corporations		
19970 Redlands LLC SUBJECT:		
	Name of Limited Liability Company	<del></del>
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing	<u>;</u> .
Please return all correspondence concerning	g this matter to the following:	
Laura C Andrade		
Name of Person	<del>-</del>	
19970 Redlands LLC		
Firm/Company		18 A
19970 SW 280th St		:
Address		AUG 13 PH 6: 4 LAHASSEE, FLORID
Homestead, FL 33031		
City/State and Zip Cod	le	6: 47 ORIDA
windtransp@gmail.com		,, 7
E-mail address: (to be used for future	annual report notification)	
For further information concerning this mat	tter, please call:	
Laura C Andrade	786 252-6930	
Name of Person	Area Code & Daytime Telep	phone 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 follow	ring amount:	
<b>☑</b> \$25 Filing Fec	\$55 Filing Fee & Certified Copy	y

## 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

a)	me of the limited liability company: 19970 Rec 19970 SW 280th ST Homesteda, FL 3303		9		
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	19970 SW 280th St, Homestead, FL 330	31	Some. SIAT BE COST OFFICE BOX		
	07/05/2040				
	07/05/2018		0162523		
	Date of filing/registration in Florida	4.	Document number		
(a)	Yaisy Padron	<del></del>	<u></u>		
	Registered Agent and Registered Office shown on the records of the Florida Dept, of State:				
	2561 SW 11 ST Miami, FL 33135				
	Registered Office Address (MUST BE FLORIDA STRE				
	2561 SW 11 St				
	2561 SW 11 St Miami	33135			
L		FL 33135	<del></del>		
b)	Miami Laura C Andrade		<del></del>		
b)	Miami		<del></del>		
b)	Miami Laura C Andrade	ered Office address:	<del></del>		
b)	Miami  Laura C Andrade  Enter name of NEW Registered Agent and/or NEW Registered	ered Office address:	FILED LAUG 13 PK 6: LLAHASSEE, FLOR		
b)	Miami  Laura C Andrade  Enter name of NEW Registered Agent and/or NEW Regist  19970 SW 280th ST Homestead, FL 330	ered Office address:	HILED LANG 13 PK		

Laura C Andrade 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 standars 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 yegistered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of