

44000176842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

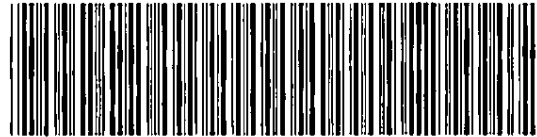
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200391992682

FILED

2022 AUG -2 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2022 AUG -2 PM 1:53

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

A. BUTLER

AUG - 3 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Real Pakal Enterprises, L.L.C.

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:

Joaquin A. Sosa, JD

Name of Person

JAS.LAW, LLC

Firm/Company

4430 SW 83rd Avenue

Address

Miami, FL 33155

City/State and Zip Code

jasosa@bellsouth.net

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

For further information concerning this matter, please call:

Joaquin A. Sosa

818

262-5853

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

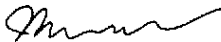
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 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. Name of the limited liability company: Real Pakal Enterprises, L.L.C.
2. (a) 4430 SW 83rd Avenue (b) 1825 Ponce de Leon Blvd.
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
Miami, FL 33155 Ste. 500
Coral Gables, FL 33134
11/10/14 L14000176842
3. Date of filing/registration in Florida 4. Document number
5. (a) Joaquin A. Sosa
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1825 Ponce de Leon Blvd.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Ste. 500
Coral Gables, FL 33134
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Joaquin A. Sosa, JD
NEW Registered Office Address:
12511 SW 9th St.
Miami, FL 33184

FILED
2022 AUG -2 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FL

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.

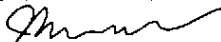


Signature of a member or authorized representative of a member

Joaquin A. Sosa for JAS.LAW, LLC

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 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 605, 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