

L19000072862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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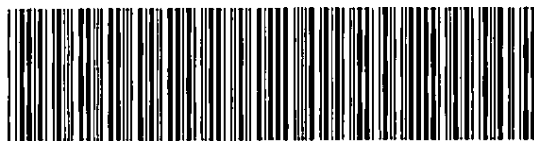
(Business Entity Name)

(Document Number)

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2023 FEB -6 PM 2:47
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 313 E 4TH TERRACE,LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristen Pinto

Name of Person

313 SE 4TH TERRACE,LLC

Firm/Company

2615 SW 29TH WAY

Address

FT LAUDERDALE,FL 33312

City/State and Zip Code

pintolawgroup02@gmail.com

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

For further information concerning this matter, please call:

Feri Pinto 954 955 0241

Name of Person at () 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

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.

1 Name of the limited liability company: 313 SE 4TH TERRACE,LLC

2 (a) 2615 SW 29TH WAY,FT.LAUDERDALE,FL,33312 (b) 2615 SW 29TH WAY,FT.LAUDERDALE,FL,33312
Principal office address of limited liability company Mailing address of limited liability company.
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

1 31/23 L19000072862

3 Date of filing/registration in Florida 4 Document number

5 (a) PINTO,KRISTEN
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2615 SW 29TH WAY,FT.LAUDERDALE,FL,33312
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address
TERI PINTO
NEW Registered Office Address

5932 NW 93RD TERRACE,TAMARAC, FL 33321

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] Kristen Pinto
Signature of a member or authorized representative of a member Printed or typed name of signer

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]
Signature of Registered Agent

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

FILED
2023 FEB -6 PM 2:47
TALLAHASSEE, FL
SECRETARY OF STATE