L21000352440

(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.								
J DENNIS								
JUL 2 1 2023								

Office Use Only



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THE RETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ARTEPACKUSA LLC ECT:							
	Nan	ne of Limited Liability Company						
Dear S	Sir or Madam:							
The en	nclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.						
Please	return all correspondence concerning th	s matter to the following:						
ALVA	RO PEREZ PELAEZ							
	Name of Person							
ARTE	PACKUSA LLC							
	Firm/Company							
7540 \$	SW 139TH ST							
•	Address							
PALM	IETTO BAY, FL. 33158							
	City/State and Zip Code							
	perez@artepack.co							
	E-mail address: (to be used for future and	ual report notification)						
For fu	orther information concerning this matter	please call:						
ANA	E. RICO	305 610-7647						
	Name of Person	Area Code & Daytime Telephone N	umber					
	Mailing Address:	Street Address:						
	Registration Section	Registration Section						
	Division of Corporations	Division of Corporations						
	P.O. Box 6327	The Centre of Tallahassee	Δ					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	U					
	Enclosed is a check for the following	amount:						
	Money Order ■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						

INHS18 (2/14)

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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. No	anc of the limited liability company:	A LLC				
2. (a)	7540 SW 139TH ST		(b) 7540 SW	/ 139TH ST		
ž. (u)	Principal office address of limited liability company: (Note: ATIST BE STREET ADDRESS)	_	(0)	Mailing address of limited (Note: MAY BE POST		
- ·	7540 SW 139TH ST		7540 SW	139TH ST		
	PALMETTO BAY, FL. 33158 US		PALMET	TTO BAY, FL. 33158		
	AUGUST 5, 2021		# L21000 3	52440		
3.	Date of filing/registration in Florida	- 4.		Document number		
5. (a)	AUGUST 5, 2021					
J. (a)	Registered Agent and Registered Office shown on the records of	the Flo	rida Dept. of St	 ut c:		
	MATRIX INTL. BUSINESS CONSULTING LLC					
	Registered Office Address QUEST BE FLORIDA STREET	APDR	£ 3 57)	_		
	759 SW FEDERAL HIGHWAY, SUITE 304				202	žá
	STUART,	3499		_	2023 MAY	38.
		 -				JAT T
(Ъ)				_	<u>~</u>	375
(-)	Enter name of NEW Resistered Agent and/or NEW Resistered Office address:				=	300
	ALVARO PEREZ PELAEZ			···	10: 19	LED Y OF STATE PARPATION
	NEW Registered Office Address:				5	ž
	7540 SW 139TH ST			_	•	-
	PALMETTO BAY, FL	33158		_		
chang agent was/w the end sign of the end sign	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liability or authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law o	regist ibility of the l limite	company, it is imited liability con	s hereby confirmed that by company or as otherwapany. A	the changing provi	ge(s) ded in

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

INHS18 (2/14)