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LAW OFFICES

RUSSELL D. KAPLAN

A PROFESSIONAL ASSOCIATION

SUITE 100

750 SOUTHEAST 3RD AVENUE FORT LAUDERDALE, FLORIDA 33316

CR2E031(7/97)

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Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1		
(Corporation Name)	(Document #)	<u> </u>
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☐ Walk in ☐ Pick up time _ ☐ Mail out ☐ Will wait	Photocopy Certificat	
NEW FILINGS	<u>AMENDMENTS</u>	: 34 PATE DRIDA
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Direct Change of Registered Agent Dissolution/Withdrawal Merger	ector
OTHER FILINGS	REGISTRATION/QUALIFICATION	<u>ON</u>
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	
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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 608.416 or 608.508, 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.

agent, or both, in the State of Florida. agent, or both, in the State of Florida.
1. The name of the limited liability company is: Can Manager late Tellace
1. The name of the limited hability company is: 3405 theather Tellace 2. The mailing address of the limited liability company is: 33319
Laudehul FC 33319
1/25/2000 <u>L000000000000000000000000000000000</u>
1 \ Z5 \ Z000 4. Document number
3. Date of filing/registration in Florida
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: TVONCE Zant Name Address Address Address
City, State and Zip
6. The name and address of the new registered agent and/or office:
Cesare ASTUNI ARE S
S300 DW ZIST Street #2 & #2 & #32 & #32 & #32 & #32 & #32 & #33 &
City, State and Zip
3.37, 3.37
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. (Signanize of a member or authorized representative of a member)
(Signature of a member of audionized representative
(Printed or typed name of signee) (Printed or typed name of signee)
(Printed or typed name of signes)
(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 accept the appointment as registered agent and agree and complete performance of my duties, 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 and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 508, 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.

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

MHS18(10/99)

FILING FEE: \$25.00