1/4/2021

Division of Corporations

Florida Department of State

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(((H21000003341 3)))



H210000033413ABCO

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TQ:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

: (702)866-2500 Phone

: (702)866-2689 Fax Number

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processing@incorp.com Email Address:

LLC REGISTERED AGENT CHANGE ROYAL PALM CAPITAL LLC

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COVER LETTER H21000003341 3

TO:	Registration Section Division of Corporations	
A		M CAPITAL LLC
SUBJI	Name of Limi	ted Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter t	o the following:
	Desiree Miller	
	Name of Person	
	InCorp Services, Inc.	
	Firm/Company	,
	3773 Howard Hughes Pkwy. · Suite 500S	
	Address	
	Las Vegas, NV 89169-6014	
	City/State and Zip Code	
	processing@incorp.com	
	E-mail address: (to be used for future annual repor	t notification)
For fu	orther information concerning this matter, please ca	ıU:
Desi	ree Miller for InCorp Services, Inc. 806	0-246-2677
	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	: H21000003341 3
	□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS	18 (2/14)	

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

H210000033413

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 2. (a) Principal office address of limited (Nate: MUST BE STREE) 8371 S.W. 33 TERRACE ROYAL PALM, FL 33155 04/03/2001 3. Date of filing/registration 5. (a) Jorge de Velasco Registered Agent and Registered Office to 1825 PONCE DE LEON BLVI Registered Office Address (MUST B.) CORAL GABLES	I liability company: TADDRESS In in Florida Shown on the records of	(b)	Mailing address (Note: MAY) 371 S.W. 33 TERRAC OYAL PALM, FL 3319 1000005110 Document n	55
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Registered Office Address [MUST B		T ADDRESS)		
CORAL GABLES		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		[= [2021 JAN
CORAL GABLES				JAN T
·	, F	_{7L3313}	34	Q (run)
(b) InCorp Services, Inc. Enter name of NEW Registered Agent	and/or <u>NEW Register</u>	ed Office addres		M 1:17
17888 67th Court North				·
NEW Registered Office Address:				
l la alata		3347	70	
Loxahatchee	, l	FL		