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* COVER LETTER * *

TO: Registration Section Division of Corporations				
SUBJECT: Metropolitan 1104 Name of Lin	To vestment L.L.C.			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
Nestor Gorfinkel				
Name of Person				
Registered Services, LLC				
Firm/Company				
2241 Hollywood Bivd.				
Address				
Hollywood, FL 33020				
City/State and Zip Code				
fl.regservices@gmail.com				
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, please	call:			
Nestor Gorfinkel	305 932-5757			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
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.

	me of the limited liability company: Metr	,		
. (a)	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: (b)	Mailing address of limited liabilit (Note: MAY BE POST OFFI	y company:
3.	Date of filing/registration in Florida	4.	Loloooo57a3	3
5. (a)			. <u>. </u>	
	Registered Agent and Registered Office shown on the reco	ords of the Florida D	Dept. of State:	
	REGISTERED SERVICES, LLC Registered Office Address (MUST BE FLORIDA STI	DEET ADDRESS	-	
	20818 West Dixie Highway		> 0) #r
	Aventura	_{EI} 33180		15 _
		, FL		3
(b)				O law
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	istered Office addi	ress:	
	Registered Services, LLC		S I A . OR	<i>α</i>
	NEW Registered Office Address:	<u> </u>		G
	2241 Hollywood Blvd.			
	Hollywood	, FL 33020		
the ch agent was/w	imited liability company is not organized under ange or changes are made, the Florida street addiwill be identical. Or, in the case of a Florida limere authorized by an affirmative vote of the menticles of organization or the operating agreement	ress of the regist lited liability con libers of the limi	ered office and the business office o npany, it is hereby confirmed that th ted liability company or as otherwise	of the registere ne change(s)
Sign	ature of a member or authorized representative of a member		Printed or typed name of signe	ee
I here provis the ob to men notifie	by accept the appointment as registered agent a ions of all statules relative to the proper and col ligations of my position as registered agent as p ely reflect a change in the registered office addi d in writing of this change.	nd agree to act mplete performa rovided for in C ess, I hereby co	in this capacity. I further agree to c nce of my duties, and I am familiar t hapter 605, F.S. Or, if this documer nfirm that the limited liability compo	omply with the with and accep it is being filed any has been
Signat	ure of Register Sent Nester Gorfinkel 9	_		
	Division of Corporations	P.O. Box 6327 ING FEE: \$25.		