101000012913

E-SYNTHESIS, LLC
E-SYNTHESIS, LLC 9520 SOUTHWEST HOTH ST.
SUITE 208
MIAMI, FL 33165
Common and the second
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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[01-12913
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05 APR 18 AM 10: 03

please Danilo Jose Vargas From: To whom it may concern: TO THE COM ST.

TO WORK ST.

TO 2971 MIAMI Thanh Joy! Vouser Vouser

25 APR 18 AM 10: 03

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.

1. The name of the limited lial	bility company is:	<u> E - S</u>	inthes	iis,	LLC	
 The name of the limited lia The mailing address of the 	limited liability compa	mv is ·	9520	SW	40th	Street
Sure 208	Minimum i Tol		<u></u> 			
JUITE 208, 1	VIGMI, PL	3316	<u>, </u>			· · · · · · · · · · · · · · · · · · ·
SUITE 208, 1 08/03/2001 3. Date of filing/registration in			1010	0001.	2913	
Date of filing/registration in	1 Florida	4.	Document	number		
5. The name of the registered a Florida Department of State	?					the
	ESTEPE,	RAFA	EL			
	7520 SW 40	me 1774 S7	r. SUM	TE 2	08	
	ESTEPE, Na 1530 SW 40 Add Miami, Fl City, Stat	ress _ 33/	165			
	City, Stat	e and Zip				
6. The name and address of the						
	JOSE VAR Nam 10 SW 407H	GAS,	DANI	<u>-0</u>		
952	0 SW 40174	e <i>S7</i> . ^C	SUITE &	208		
Flo	orida street address (P.	O. Box NO	T acceptabl	le)		
	MIAMI, FI	33/	65	*		
	MIAMI, FI City, State	and Zip		£.	TALL	05
If the limited liability company confirmed that after the change and the business office of the r liability company, it is hereby of the members of the limited liability operating agreement of the (Signature of a member or authorized re	e or changes are made, egistered agent will be confirmed that the chapility company or as of limited liability company.	the Florida	street addre	ess of the	ia, icis nere e registered Florida limi an affirmati	office
DANILO JOSE	= VARGAS			F	_	
DANILO VOSE (Printed or typed name of signee)						
I hereby accept the appointme comply with the provisions of a and I am familiar with and acceptanted by this dadress, I hereby confirm that	nt as registered agent ill statutes relative to t ept the obligations of ocument is being filed the limited liability co	and agree to the proper a my position to merely re mpany has	o act in this und complet as registe eflect a cha been notifie	s capacit te perfori ted agent inge in th td in wrii	y. I further nance of m as provide ae registered ing of this	agree to y duties, d for in d office change.
(Signature of Registered Agent)						
Division of	Corporations, P.O. B	lox 6327, T	allahassee,	FL 323	14	

FILING FEE: \$25.00

INHS18(10/99)