L0200002140

Salerno				
(Requestor's Name) 1170 IBis AVR				
Miami Spring SH. 33/				
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Document Number)				
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LO2-2/40

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 lin	nited liability company is: C.	A.Salerno, Jr Enterprises, L	<u></u>		
2. The mailing address	s of the limited liability compa	ny is : 1170 Ibis Avenue, M	liami Springs,		
Florida, 33166					
01/29/2002		L02000002140	L02000002140		
3. Date of filing/registration in Florida		4. Document number	r		
5. The name of the reg Florida Department	istered agent and the registered of State: Business Fillings Incorp		he records of the		
	Na 1000 West Ave, Suite 1				
	Add Miami Beach, Florida 3	3139			
6 The name and addre	City, States of the new registered agent	•	(**) C.		
	Charles A. Salerno, Jr.		. 		
;	Nam		<u> </u>		
	1170 Ibis Avenue		ا بر المراجع		
	Florida street address (P.	O. Box NOT acceptable)	* * * * * * * * * * * * * * * * * * *		
	Miami Springs, FI	_33166	. ED		
	City, State	and Zip			
confirmed that after the and the business office liability company, it is the members of the lim the operating agreement.	company is not organized under the change or changes are made, to of the registered agent will be hereby confirmed that the chanited liability company or as of the limited liability computation of the limited liability computation of the limited liability computation.	the Florida street address of the identical. Or, in the case of a nge(s) was/were authorized by	he registered office a Florida limited v an affirmative vot	te of	
(Printed or typed name of sig	nee)				

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to 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 Chapter 608, 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.

INHS18(10/99) FILING FEE: \$25.00

(Signature of Registered Agent)