C04000020096

				
(Re	questor's Name)			
(Address)				
(Address)				
(Cit	:y/State/Zip/Phone	e#)		
\	,	•		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
•	•	·		
(0-	A Nimeter			
(DC	ocument Number)			
Certified Copies	Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:	1		
		. }		
		ł		
		ł		
]		
	ħ	Ì		
		j		

Office Use Only



600057271896

08/01/05--01035--011 **35.00

LA 09/12/05

05 SEP 12 PH 2: 1/8

COVER LETTER

TO:	Amendment Section Division of Corporations			
·,	The Melgaza Croup I I C			
SUBJ	JECT: The Malgoza Group LLC (Name of c	corporation)		
DOC	UMENT NUMBER: L04000020096			
	enclosed Statement of Change of Registered Office	ce/Agent and fe	e are submitted for f	ilino
	e return all correspondence concerning this matte	_		<u></u>
	Yazmin M. Malgoza			_
	(Name of co	ntact person)		
	THE MALGOZA GROUP LLC			1.0
	(Firm/Co	ompany)		5 St *
	P.O. Box 771717			P12
	(Add	iress)		3
	Orlando, Florida 32877			OS SEP 12 PH 2: 46
Г С	•	nd zip code)		P
For Iu	uther information concerning this matter, please	call:		
Yazm	in M. Malgoza	at (<u>407</u>	256-3435 ode & daytime teleph	
	(Name of contact person)	(Area co	ode & daytime teleph	ione number)
Enclo	sed is a \$35.00 check made payable to the Depart	tment of State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divi 409	et Address: endment Section sion of Corporations E. Gaines Street ahassee, FL 32399	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 9, 2005

YAZMIN M. MALGOZA THE MALGOZA GROUP LLC P.O. BOX 771717 ORLANDO, FL 32877

SUBJECT: THE MALGOZA GROUP LLC

Ref. Number: L04000020096

We have received your document for THE MALGOZA GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 305A00051086

SECTION OF SECTIONS AND ASSESSMENT OF SECTION OF SECTIO

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 voin, in the State of Fiorida.
1. The name of the limited liability company is: The Malgota Group LLC
2. The mailing address of the limited liability company is:
13561 Buckhorn Run Ct. Oylando Fl 32837
3/16/2004 1040000 20096
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Legal Zoom Nevada, Inc. Name 44 W. Flagler Suite 675 Address Miami FC 33130 City, State and Zip
5. The name and address of the new registered agent and/or office:
Name 1361 Buckhorn Run Ct- Florida street address (P.O. Box NOT acceptable) Ovlando, FL 32837 City, State and Zip
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 iability 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 he operating agreement of the limited liability company.
Signature of a member or authorized representative of a member)
Printed or typed name of signee) Malgoza (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 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. Decoration Decorati
• • • • • • • • • • • • • • • • • • • •

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18(10/99)