105000037964

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



200315782872

07/16/18--01035--017 **23.00

D RRUCE JUL 2 1 2018

COVER LETTER

Division of Corporations					
SUBJECT: SOTO & VALLEJO, LLC					
Nan	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning th	is matter to the following:				
ERNI E 30TO, FDDS					
Name of Person					
SOTO & VALLEJO, LLC					
Firm/Company					
10187 CLEARY ROAD, SUITE 103					
Address					
PLANTATION, FL 33424					
City/State and Zip Code					
DR_SOTO@msn.com					
E-mail address: (to be used for future ann	ual report notification)				
For further information concerning this matter,	please call:				
Daniel J. Koleos	954 474-9929 at()				
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	S55 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.

1. N	ame of the limited liability company: SOTO & V	ALLEJO,	LLC
- , .	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10187 CLEARY BLVD, SUITE 103		10187 CLEARY BLVD, SUITE 103
	PLANTATION, FL 33424		PLANTATION, FL 33424
	4/18/2005		L05000037964
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	ERNIE F. SOTO		
	Registered Agent and Registered Office shown on the records	of the Florida	Dept, of State:
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS	2
	10187 CLEARY BLVD, SUITE 103		
	PLANTATION	FL_33424	
.1 .	DANIEL J. KOLEOS		
(b)	Enter name of NEW Registered Agent and/or NEW Registe	red Office ad	dress:
	VOLEGO DOCENDEDO MONAUON		
	KOLEOS ROSENBERG MCMAHON		
	NEW Registered Office Address:		
	8211 W. BROWARD BLVD., #330		
	PLANTATION	FL_3342	4
the ch agent was/w	limited liability company is not organized under the	laws of the s of the regi d liability co rs of the lin	State of Florida, it is hereby confirmed that after stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) sited liability company or as otherwise provided in
	IIII ANOO		Ernie F Soto
-	ature d'a member or authorized representative of a member		Printed or typed name of signee
provis the ob- to med	thy accept the appointment as registered agent and sions of all statutes relative to the proper and completions of my position as registered agent as provedly referred agent as proved y referred agent as proved white uddress and privileged of this change.	agree to ac. ete perform ided for in (, I hereby c	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
Signat	ure of Registered Agent		
	Division of Corporations • P.C FILING	O. Box 632 J FEE: \$25	