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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: EL ENTERPRISES LLC (Name of Lin	mited Liability Company)	5
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	matter to the following:	
ERNESTO CISNEROS (Name of Person)		
(Name of Person)		
EL ENTERPRISES, LLC (Firm/Company)	₩	PILED MIN: 26
(Firm/Company)		星型
3924 BROOKMYRA DRIVE	TEAN TO SEE THE SEE TH	9 8
(Address)		
ORLANDO / FLORIDA 32837	O A DE	26
(City/State and Zip Code)	<u>.</u>	
For further information concerning this matter, ple	ease call:	
ERNESTO CISHEROS at(HOT \ 592-7UUI	
(Name of Person)	(Area Code & Daytime Telephone Number)	٠.
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 am	ount:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

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.

The State of Trontage.	
1. Name of the limited liability company: EL ENTE	RPRISES, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) PREVIOUS Address: ITIS NESTIRWOOD (HOVED ON 6/28/08) ORLANDO, FL 32 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	TR.
5. (a) Registered Agent and Registered Office shown on t	LOSOOOS4816 4. Document number the records of the Florida Dept. of State: CORPORATION SERVICE COMPANY
Registered Agent: Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office address: ERNESTO CISNEROS 3924 BROOKMYRA DRIVE ORLANDO FL 32837
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. Sumb Cureous (Signature of a member or authorized representative of a member)	aws of the State of Florida, it is hereby confirmed address of the registered office and the business use of a Florida limited liability company it is
(Printed or typed name of signee) I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the program familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified because of Registered Agent) (Signature of Registered Agent)	LAHA C
Division of Corporations, P.O. Box FILING FEE:	USE7, Ramanassee, FE SESTA