

LOS0000079060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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(Business Entity Name)

(Document Number)

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Certificates of Status _____

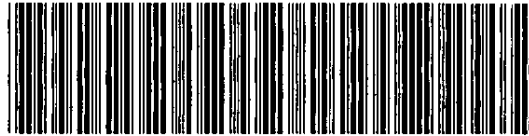
Special Instructions to Filing Officer:

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JUL 15 2008

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2008 JUL 14 P 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLARACOL, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hector Collado
(Name of Person)

(Firm/Company)

5311 Fisherm Island Drive
(Address)

Miami Fla. 33109
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Hector Collado at (305) 216-2352
(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

☐ \$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.

1. Name of the limited liability company: Clanacol, LLC

2. (a) Principal office address of limited liability company: 5311 Fishermans Island Dr.
Miami, Fla. 33109
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 5311 Fishermans Island Dr.
Miami, Fla. 33109
(Note: MAY BE POST OFFICE BOX)

August 10, 2005
3. Date of filing/registration in Florida

L05000079060
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Corporate Connections Network, Inc.

Registered Office Address:

11380 Prosperity Parkway Road #221E
Palm Beach Gardens, FL 33410

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Agent:

Hector Collado

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

5311 Fishermans Island Dr.
Miami, FL 33109
FL 33109

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 liability 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 the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

Hector Collado
(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.


(Signature of Registered Agent)

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