10500095437

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J. HARRIS

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

i	Division of Corporations				
SUBJEC	FIVE DEL RIO, LLC				
NO DOLA	Name of Limited Liability Company				
Dear Sir	or Madam:				
The encl	osed Registered Agent/Registered Office Cl	hange and I	fee(s) are submitted for filing.		
Please re	eturn all correspondence concerning this ma	tter to the f	following:		
	GUILLERMO DEL RIO				
	Name of Person		_		
	DEL RIO AND ASSOCIATES				
	Firm/Company		_		
	5975 SUNSET DRIVE, SUITE 404	1			
	Address				
	SOUTH MIAMI, FL 33143				
	City/State and Zip Code		-		
	delrioandassociates18@gmail.com				
E-1	mail address: (to be used for future annual re	eport notifi	cation)		
For furth	ner information concerning this matter, pleas	se call:			
	Guillermo Del Rio	305	668-4909		
	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	Reg Div P.O	gistration Section vision of Corporations 0. Box 6327 lahassee, Florida 32314		
	Enclosed is a check for the following amo	unt:			
	□ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		



June 6, 2018

GUILLERMO DEL RIO DEL RIO AND ASSOCIATES 5975 SUNSET DR, SUITE 404 SOUTH MIAMI, FL 33143

SUBJECT: FIVE DEL RIO, LLC. Ref. Number: L05000095437

We have received your document for FIVE DEL RIO, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 618A00011761

Signed and feut



May 11, 2018

GUILLERMO DEL RIO 5975 SUNSET DR SUITE 404 SOUTH MIAMI, FL 33143

SUBJECT: FIVE DEL RIO, LLC. Ref. Number: L05000095437

We have received your document for FIVE DEL RIO, 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 a LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 818A00009792

A Hack form. Hay 29/18

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

I. Na	me of the limited liability company:FIVE_DEL_R	NO, LLC	
2. (a)	5975 Sunset Dr. Suite 404	_ (b) _	5975 Sunset Dr. Suite 404
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	South Miami, FI 33143		South Miami, Fl 33143
	968/05		L05000095437
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	FEDERICO GARCIA		
J. (u)	Registered Agent and Registered Office shown on the records of th	ie Florida Dep	t, of State:
	4649 Ponce De Leon No. 404		
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	
	Coral Gables, Fl 33146		₹. №
		<u> </u>	
	, FL_		Dit uner.
(b)			<u> </u>
(b)	Enter name of NEW Registered Agent and/or NEW Registered C	Office address	
	GUILLERMO DEL RIO		
	NEW Registered Office Address:		
	5975 Sunset Dr. Suite 404		
	South Miami FL_	33143	
the cha agent was/we the arti Ly Signal I herei the obli	imited liability company is not organized under the law nge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law to be accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. In the writing of this change.	the registered bility compared the limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) Hiability company or as otherwise provided in lity company. Loring Del Did

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

Signature of Registered Agent