# LU4000039684

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T. CLINE
JUL 16 2019
EXAMINE

## Pedro J. Martínez-Fraga, Sr. 11251 SW 157th Court Miami, Florida 33196

July 14, 2010

#### By FedEx

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Habanos Finos International, LLC

Document No.: L06000039684

Dear Sir or Madam:

Enclosed please find the Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company.

We have updated the new address and contact information. Additionally, enclosed please find a check in the amount of \$55.00 covering the Filing Fee as well as the Certified Copy. For your convenience we have enclosed a self-addresses prepaid envelope for the Certified Copy to be returned to us.

Should you have any questions, please feel free to contact me. Thank you.

Sincerely,

J. Martinez-Fraga, Sr.

/eg

Encl.

### **COVER LETTER**

Registration Section

TO:

Division of C	Corporations				
SUBJECT:	HABANOS FIN	NOS INTER			
Dear Sir or Madam:		·			
The enclosed Regist	ered Agent/Registered Off	ice Change and	· I fee(s) are submitted for	or filing.	
•	respondence concerning th	_	. ,		
Pedro	o J. Martinez-Fraga, Sr. Name of Person			SECR TALLA	
	Firm/Company			HASSEE.	
11	251 SW 157th Court Address			RY OF STATE SEE, FLURIDA	
	iami, Florida 33196 City/State and Zip Code				
E-mail address: (to b	pimf@bellsouth.net the used for future annual report noti	fication)			
For further informat	ion concerning this matter,	please call:		2	
	rtinez-Fraga, Sr. a	at ( <u>305</u> ) Area	282-1927 Code & Daytime Telephone N		
Registration S Division of Co Clifton Buildi	orporations ng /e Center Circle	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314		
Enclosed is	a check for the following	amount:			
\$25 Filing	, Fee	<b>√</b> \$55 F	iling Fee & Certified C	ору	

# 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: HABANC	S FINOS INTERNAC	IONAL, LLC			
2. (a) Principal office address of limited liability company	y: Pedro J. Mart	Pedro J. Martinez-Fraga, Sr.			
(Note: MUST BE STREET ADDRESS)	11251 SW 157th Court Miami, Florida 33196				
(b) Mailing address of limited liability company:	Pedro J. Martine	z-Farga, Sr.			
(Note: MAY BE POST OFFICE BOX)	Miami, Florida 33196				
04/17/2006	L06000039	684			
3. Date of filing/registration in Florida	4. Document number	IZs 留			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida D	- m - 355			
Registered Agent:	Liza Riso	SS 5			
Registered Office Address:	2121 SW 3rd Avenue Suite 100 Miami, Florida 33129	FOR THE LOWER TO THE PARTY OF T			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	om J			
NEW Registered Agent:	Pedro Martinez-Fraga, Sr.				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	ice Address: 11251 SW 157th Court				
	Miami	,FL <u>33196</u>			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the tical. Or, in the case of a Fl ) was/were authorized by ar twise provided in the article	it is hereby registered office orida limited a affirmative vote s of organization			
Signature of a member of phylorized representative of a member  Pedro J. Martinez-Fraga, Jr.	_				
Printed or typed name of signee	<del></del>				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my particular to the provision of this document is being filed to me address, thereby confirm that the limited liability compand	ngree to act in this capacity. Oper and complete perform Sition as registered agent a erely reflect a change in the y has been notified in writin	I further agree to ance of my duties, s provided for in registered office ag of this change.			

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