

LO6000042170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

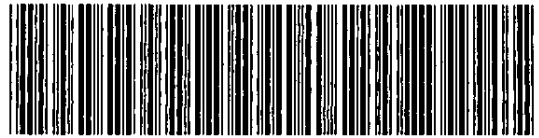
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100174116601

04/05/10--01020--005 \*\*25.00

FILED  
10 APR -5 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
APR 6 2010  
EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Golden House 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:

Samir Lopez  
Name of Person

Golden House LLC  
Firm/Company

365 Holly Dr  
Address

West Palm Beach, FL 33415  
City/State and Zip Code

Lopezsam3@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samir Lopez at ( 561 ) 317-2526  
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

FILED  
10 APR -5 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Golden House LLC

2. (a) Principal office address of limited liability company: Golden House LLC



(Note: **MUST BE STREET ADDRESS**)

365 Holly Dr  
W.P.B., FL 33415

(b) Mailing address of limited liability company:



(Note: **MAY BE POST OFFICE BOX**)

Golden House LLC  
365 Holly Dr  
W.P.B., FL 33415

04/24/2006  
3. Date of filing/registration in Florida

206000042170  
4. Document number

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

Registered Agent:

Lopez, Sam  
365 Holly Dr  
W.P.B., FL 33415

Registered Office Address:

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

**NEW Registered Agent:**

Sergio Lopez

**NEW Registered Office Address:**

(**MUST BE FLORIDA STREET ADDRESS**)

365 Holly Dr  
West Palm Beach, FL 33415

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

Samir Lopez  
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