

LOG000118230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

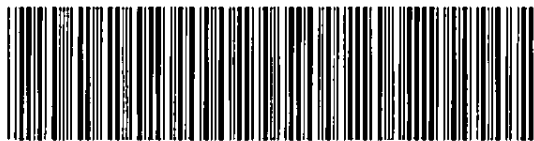
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RA Change

APR 24 2024

D CUSHING

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SOSA ART, 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:

Jose R. SOSA  
Name of Person

SOSA ART, LLC  
Firm/Company

770 CLAUGHTON ISLAND DR SUITE CU-1  
Address

MIAMI, FL 33131  
City/State and Zip Code

JRSOSA29@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE R SOSA at ( 786 ) 556-7672  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

INHS18 (2/14) PAID \$35 ALREADY

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2024 MAR 27 AM 11:13  
CORPORATION OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 22, 2024

JOSE R SOSA  
SOSA ART, LLC  
770 CLAUGHTON ISALND DR., SUITE CU-1  
MIAMI, FL 33131

SUBJECT: SOSA ART, LLC.  
Ref. Number: L06000118230

We have received your document for SOSA ART, 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 Limited Liability Company. 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) 245-6050.

Diane Cushing  
Operations Manager A

Letter Number: 624A00001314

**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.

1. Name of the limited liability company: SOSA ART, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

770 CLAUGHTON ISLAND DR  
SUITE CU-1, MIAMI, FL 33131

Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

770 CLAUGHTON ISLAND DR  
SUITE CU-1, MIAMI, FL 33131

December 12, 2006

LO6000118230

3. Date of filing/registration in Florida \_\_\_\_\_ 4. Document number \_\_\_\_\_

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

BISCAYNE BUSINESS MANAGEMENT INC

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

4000 Ponce de Leon BLVD  
#420, CORAL GABLES, FL 33146

(b) Jose R. Sosa

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

SOSA ART, LLC

**NEW Registered Office Address:**

770 CLAUGHTON ISLAND DR SUITE CU-1  
MIAMI, FL 33131

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 SECRETARY OF STATE  
 TALLAHASSEE, FL

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 member or authorized representative of a member

JOSE R SOSA

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 605, 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