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2016 JUL -8 PH 12:

K.SALY EXAMINER JUL 11

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PEREZ-Espinos A FAmily Holdings, 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:
Ang M. VeLiz Name of Person
Ang M. Veliz, P. A. Firm/Company
One Alhambra Plaza, Penthouse Address
Coral GABIOS FT 33134 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
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

INHS18 (2/14)

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. Na	ame of the limited liability company: Penez-Espinosa Framily Holdings, LL	<u>.c</u>
2. (a)	·	_
3.	Date of filing/registration in Florida 4. Document number	_
5. (a)	LAMONT, Neiman Interian a Bellet, P.A. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: New World Tower Suite 801 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 100 N. Biscayne Blvd.	
(b)	MAM. VELIZ P.A. Enter name of NEW Registered Agent and/or NEW Registered Office address: One Alhambra Plaza	
	NEW Registered Office Address: Penthouse Floor Coral Gables ,FL 33134	
the cha agent w was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.	
Signat	ture of a member of authorized representative of a member TERES A PEREZ-ESPINOS A Printed or typed name of signee	
I herel provisi the obl to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accelligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this charge.	ie pt id
	Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (2/14)