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B FIGUEROA MAY 22 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2018

ALCAMI, LLC 4420 S.W. 148TH TERRACE MIRAMAR, FL 33027

SUBJECT: ALCAMI, LLC Ref. Number: L07000103097

Our records indicate the registered agent for the above named limited liability company resigned on March 23, 2018 and that the limited liability company currently does not have a registered agent designated.

Chapter 605, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6823.

Gary Blankenbaker Document Specialist Division of Corporations

Letter Number: 618A00009497

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1

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	nne of the limited liability company:ALCF	HMI LL	2	
2. (a)		(b)		
~ (-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limi (Nota: MAY DE PC	ted liability company: <u>IST OFFICE BOX</u>)
	1850 OGAN DRIVE Unit 231	vS	4420 Sw 1	+8 TERPACE
	HollAN JACE BREACH AC 3300	<u>รั</u>	HIRAMAR PC	
~	10/10/2007	- 4.	LO 7000/0 Document numbe	
3.	Date of filing/registration in Florida	4.	Doctan <u>i</u> ent manoe	
5. (a)	ARTSTA EDUARDO R Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:	
	Registered Office Address <u>MUST BE FLORIDA STREET</u>	ADD <u>RESS)</u>	· <u>·····</u> ····	
	2655 LEJEUNE ROAS			2011 A. J.
	Copal GroßlesFI	33/34	<u>/</u>	in 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	PIERLE SALIBA			ASS ASS
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:		
	NEW Registered Office Address:			
	4420 SW 148 TERR			
	4160 G to 110 TERR			
	<u>HirAMAR</u>	L 3302	7	
If the 1	limited liability company is not organized under the la	iws of the State	of Florida, it is hereby	confirmed that after
the cha	ange or changes are made, the Florida street address of will be identical. Or in the case of a Florida limited b	fithe registered fiability compa	ny, it is hereby confirme	ed that the change(s)
⊣was/w	ere authorized by an affirmative vote of the members icles of brganization or the operating agreement of th	of the number	парниу сонграну ог аз ч	otherwise provided in
	Car	K	ATHLEEN O Printed or typed name	Luraik
•	nure of a member or authorized representative of a member		L'andreas a	ana ta annulu mith tha
I here provis	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complet lightions of my position as registered agent as provia with wifect a changelin way registered office address, a a providing of this change.	gree to act in a le performance leil for in Chap	of my duties, and I am j ter 605. F.S. Or, if this	amiliar with and accept document is being filed
to mer notifie	eist Note of my baselon yn registered office address, i eist Nylect a changelin yn registered office address, i	Thereby confir	m that the limited Itabili	ity company has been
	The A All			
Signati	1 1			
	Division of Corporations• P.O. FILING	. Box 6327• Ti FEE: \$25.00	allahassee, FL 52514	

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