107000114455

Requestor's Name)	
Address)	
Address)	
City/State/Zip/Phone #	¥)
☐ WAIT	MAIL
Business Entity Name	e)
Document Number)	
Certificates o	of Status
to Filing Officer:	
	Address) Address) City/State/Zip/Phone in the world was a comment Number in the commen

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 1, 2018

BEATRIZ R QUERRA 3060 S MIAMI AVE MIAMI, FL 33129

SUBJECT: 801 HIALEAH DRIVE, LLC

Ref. Number: L07000114455

LEAH DRIVE, LLC and your

We have received your document for 801 HIALEAH DRIVE, 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 FL CORP, but your entity is a FL LLC. Release 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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 318A00022568

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sol Haleah Dr LL C 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:	
Beatiz R Guerra Name of Person	
Firm/Company Firm/Company AND SOLUTION AND AND AND AND AND AND AND AND AND AN	
3060 S Miami Ave. Address	
Miami Fl 33129 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Beatriz Guerra at (786) 251-2594 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: Freviously Laid	
☐ \$25 Filing Fee & Certified Copy	

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.

iorita.	
1. Name of the limited liability company: 801 Hialeah Dr, LLC	
2. (a) 801 Hialeah Dr (b) 3060 S Miami Ave	
Principal office address of limited liability company: Mailing address of limited liability company:	
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)	
Hialeah Fl 33010 Miami Fl 33129	
,	
11/13/2007 L070 U0114455	
Date of filing/registration in Florida 4. Document number	
Bolin R Anton	
5. (a) Beatiz R Anton Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
3060 S Miani Ave	
Registered Office Address MUST RE ELORIDA STREET ADDRESS	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) ARC AND ASSET 22	
Miami FL 33179	
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	
internante of NEW Registered Agent and/or NEW Registered Office address:	
Rochin R Guerra	
Beatriz R Guerra NEW Registered Office Address:	
· 3060 S Miani Ave	
5000 55 1111001101	
Miami FL 33129	
-	
he limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered	
ant will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)	
s/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in practices of organization or the operating agreement of the limited liability company.	
grature of a member or apthorized representative of a member Beatriz & Guerra Printed or typed name of signee	
gnature of a member or apthorized/representative of a member Printed or typed name of signee	
reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the	
visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed erely reflect a change in the registered office address. I hereby confirm that the limited liability company has been	
fied in writing of this change.	
mire of Registered Agent //-	
Later Cention	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00	