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PICK-UP	WAIT	MAIL
(Ві	usiness Entity Nam	ne)
(Do	ocument Number)	
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B. BOSTICK
MAR 2 4 2014
EX COINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 900 RETAIC 101, LCC 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 F PENA Name of Person 900 PETAIC 101, CCC Firm/Company
900 BISCAYNE BLUD Address
MIAHI 71 33/32 City/State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
TOSE F PE DA at (305) 32 (-986) 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

INHS18 (12/13)

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

Pursuant to the provisions of sections 605.0114, 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.

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Name of the limited liability company:	900 RETAIL 101, LLC
2. (a) Principal office address of limited liability co (<i>Note: MUST BE STREET ADDRESS</i>)	ompany: 900 BISCAT NE BLUD
(TWILL MOST DE STREET NOONESS)	MIAMI FL 33130
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME AS PROVE
02/21/2008	LD8000018586
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	
Registered Agent:	PLIVE CONSULTING GROUP, CLC
Registered Office Address:	900 BISCAY ME BULD \$ 105 MIRON FC 33/32
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW</u> Registered Agent:	JOSE F PENA
NEW Registered Agent: NEW Registered Office Address:	900 BISCAYNE BLVD ALOS
<u>(MUST BE FLORIDA STREET ADDRES.</u>	<u>S)</u> <u> </u>
fficer .	er the laws of the State of Florida, it is hereby e, the Florida street address of the registered office he identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or pany.
Signature of a member or authorized representative of a member	* u
Printed or typed name of signee	
,, ,	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00



February 5, 2014

JOSE F. PENA 900 RETAIL 101, LLC 1395 BRICKELL AVENUE #3301 MIAMI, FL 33131

SUBJECT: 900 RETAIL 101, LLC Ref. Number: L08000018586

We have received your document for 900 RETAIL 101, LLC and your check(s) totaling \$470.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Barbara Bostick Regulatory Specialist II

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Letter Number: 814A00002671