

108 000 103349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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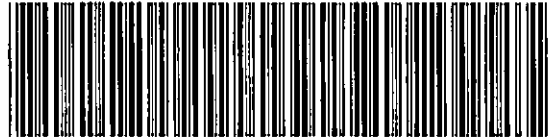
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NARVALO 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:

JEREMIE CHENET

\_\_\_\_\_  
Name of Person

NARVALO LLC

\_\_\_\_\_  
Firm/Company

18151 NE 31 CT, Suite 1407

\_\_\_\_\_  
Address

AVENTURA, FLORIDA 33160

\_\_\_\_\_  
City/State and Zip Code

jocelyne@abramoff.org

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jocelyne Abramoff

at ( 305 ) 778-9938

\_\_\_\_\_  
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

**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: NARVALO LLC

2. (a) NARVALO LLC (b) NARVALO LLC

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

18151 NE 31 CT , STE 1407

AVENTURA, FL 33160

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

18151 NE 31 CT

AVENTURA, FL 33160

04/02/2018

L08000103349

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

5. (a) TRISTAN BOURGOIGNIE, PA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5975 SUNSET DR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 603

SOUTH MIAMI, FL 33143

(b) JOCELYNE ABRAMOFF

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

18151 NE 31 CT

NEW Registered Office Address:

SUITE 1407

AVENTURA, FL 33160

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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.

JEREMIE CHENET

Signature of a member or authorized representative of a member

JEREMIE CHENET

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.*

Jocelyne Abramoff

Signature of Registered Agent