

LD8000110652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

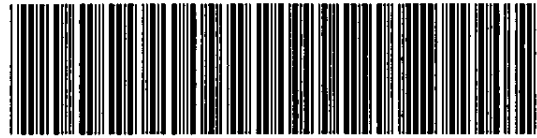
Special Instructions to Filing Officer:

L. SELLERS

NOV 18 2009

EXAMINER

Office Use Only



500162709805

11/16/09--01033--012 **25.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 DEC 24 AM 8:05

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TEPINO 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:

ROBIN BRAMSON

Name of Person

TEPINO HOLDINGS LLC

Firm/Company

4942 LE JEUNE ROAD STE 204

Address

MIAMI, FLORIDA 33146

City/State and Zip Code

DEE@TEPINO.COM

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

For further information concerning this matter, please call:

DEE FRIEDMAN

Name of Person

at (305)

725-8752

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2009

ROBIN BRAMSON
4942 LE JEUNE ROAD, STE. 204
MIAMI, FL 33146

SUBJECT: TEPINO HOLDINGS LLC
Ref. Number: L08000110652

We have received your document for TEPINO HOLDINGS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 209A00035899

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: TEPINO HOLDINGS LLC

2. (a) Principal office address of limited liability company: 4942 LE JEUNE ROAD STE 204



(Note: **MUST BE STREET ADDRESS**)

MIAMI, FLORIDA 33146

(b) Mailing address of limited liability company: PO BOX 331665



(Note: **MAY BE POST OFFICE BOX**)

MIAMI, FLORIDA 33233

DEC 2, 2008

3. Date of filing/registration in Florida

L08000110652

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

ROBIN BRAMSON

Registered Office Address:

2001 BISCAYNE BLVD 2607
MIAMI FLORIDA 33137

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

4942 LE JEUNE ROAD 204

MIAMI

, FL 33146

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.

Robin Bramson
Signature of a member or authorized representative of a member

Robin Bramson

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 608, 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.

Robin Bramson

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
DEC 24 AM 8:05
TALLAHASSEE FLORIDA