L09000000389

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Dustress Early Manne)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

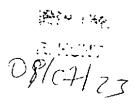




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COVER LETTER

то:	Registration Section Division of Corporations						
SUBJI	LATINO USA, LLC E CT:						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered (Office Change and fo	ec(s) are submitted for filing.				
Please	return all correspondence concerning	this matter to the fo	llowing:				
Andrey	w Pierce						
	Name of Person	· • • • • • • • • • • • • • • • • • • •	_				
Cindy's	s Florida LLC						
	Firm/Company		_				
8051 N	J. Tamiami Trail STE E6						
	Address		_				
Saraso	ta, Florida, 34243						
	City/State and Zip Code	<u>o</u>	_				
reports	@cloudpeaklaw.com						
F	-mail address: (to be used for future a	innual report notification	ation)				
For fu	ther information concerning this matt	er, please call:					
Andres	v Pierce	727 at (300-0042				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the followi	ng amount:					
	■ \$25 Filing Fee	\$25 Filing Fee & Certified Copy					

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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.

I. Na	me of the limited liability company:	LC			
2. (a)	8051 N. Tamiami Trail STE E6		8051 N. T	Tamiami Trail STE E6	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited (Note: MAY BE POS	• • •
	Sarasota, Florida, 34243		Sarasota,	Florida, 34243	
	01/02/2009	_	L0900000	0389	
	Date of filing/registration in Florida	4.		Document number	
. (a)	MCBRIDE, WILLIAM R				
. (u)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of Sta	 te:	
	5750 Major Blvd, Suite 510				
	Registered Office Address (MUST BE FLORIDA STREET	_			
	ORLANDO	32819			
	, FL			_	~ - th
(b) <u>-</u>					2023
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	_	13S
	Cindy's Florida LLC				izāslāk or "S izā SEP -7
	NEW Registered Office Address:			_	
	8051 N. Tamiami Trail STE E6				0 € 29 € 18 € 18 € 18 € 18 € 18 € 18 € 18 € 1
			<u> </u>	_	0.0
	Sarasota	34243			
hange gent v vas/wo he arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the water Pierce	register ability c of the lir limited	ed office ar ompany, it i nited liabili	nd the business office is hereby confirmed the ty company or as other mpany.	of the registered hat the change(s) erwise provided in
l herei provisi he obl o mere potified	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	perform	ance of my	pacity. I further agree duties, and I am fami	to comply with the liar with and accept
	re of Registered Agent				