## L09000072317

| (Pa                                     | questor's Name)   |             |
|---|-------------------|-------------|
| (ive                                    | questor s reame)  |             |
| . /^ /                                  | dress)            |             |
| (Ad                                     | aless)            |             |
|   |                   |             |
| (Ad                                     | dress)            |             |
|   |                   |             |
| _ (Cit                                  | y/State/Zip/Phone | e #)        |
| :<br>-                                  | ☐ WAIT            | MAIL        |
|   |                   |             |
| (Bu                                     | siness Entity Nar | ne)         |
|   |                   |             |
| (Document Number)                       |                   |             |
|   |                   |             |
| Certified Copies                        | _ Certificates    | s of Status |
|   |                   |             |
| Special Instructions to                 | Filing Officer    |             |
| Special Instructions to Filing Officer: |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |

Office Use Only



100184070221

08/16/10--01027--028 \*\*25.00



C. LEWIS

AUG 1 8 2010

EXAMINER

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |               |  |  |
|---|---------------|--|--|
| SUBJECT: THE CLUB MULLER INVESTMENTS, LLC  Name of Limited Liability Company                |               |  |  |
| D C' M  |               |  |  |
| 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:                   |               |  |  |
|   |               |  |  |
| DEDDO D. CAEZ   |               |  |  |
| PEDRO P. SAEZ  Name of Person   |               |  |  |
|   |               |  |  |
| SAEZ & ASSOCIATES, P.A.   |               |  |  |
| Firm/Company  |               |  |  |
|   |               |  |  |
| 777 BRICKELL AVENUE, SUITE 1110   |               |  |  |
| Address   |               |  |  |
|   |               |  |  |
| MIAMI, FL 33131   |               |  |  |
| City/State and Zip Code   |               |  |  |
|   |               |  |  |
| PSAEZ@SAEZLAW.COM  E-mail address: (to be used for future annual report notification)       |               |  |  |
| E-man address. (to be used for future annual report nonmention)                             |               |  |  |
| For further information concerning this matter, please call:                                |               |  |  |
|   |               |  |  |
| PEDRO P. SAEZ at (305)358-0028  |               |  |  |
| Name of Person Area Code & Daytime Telephone Number   |               |  |  |
| STREET/COURIER ADDRESS: MAILING ADDRESS:  |               |  |  |
| Registration Section Registration Section   |               |  |  |
| Division of Corporations Division of Corporations   | _             |  |  |
| Clifton Building P.O. Box 6327  | P.O. Box 6327 |  |  |
| 2661 Executive Center Circle Tallahassee, Florida 32314                                     |               |  |  |
| Tallahassee, Florida 32301  |               |  |  |
| Enclosed is a check for the following amount:   |               |  |  |
| \$25 Filing Fee & Certified Conv  |               |  |  |

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR $_{\gamma}$ BØ7H 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: The Club Muller Investments, LLC  |  |  |  |
|---|--|--|--|
| y:  |  |  |  |
| 7005 W. 17TH COURT<br>HIALEAH, FL 33014   |  |  |  |
| (b) Mailing address of limited liability company:   |  |  |  |
|   |  |  |  |
| L090000723  |  |  |  |
| 4. Document number  |  |  |  |
| 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. (State:   |  |  |  |
| ANIBAL J. DUARTE-VIERA  |  |  |  |
| 5835 BLUE LAGOON DRIVE SUITE 100 MIAMI, FL 33126  |  |  |  |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>PEDRO P. SAEZ</u>  |  |  |  |
| 777 BRICKELL AVENUE SUITE 1110 MIAMI ,FL33131   |  |  |  |
| 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.  Signature of a member or authorized representative of a member  ALFREDO MULLER  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. |  |  |  |
| oper and complete performance of my auties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.  |  |  |  |
|   |  |  |  |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent