

LD910000077988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

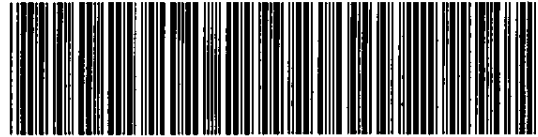
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DEC - 4 2009

**EXAMINER**

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**FILED**  
09 DEC -3 PM 8:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LUDUR 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:

Luis Duran  
Name of Person

Ludur LLC  
Firm/Company

9001 SW 122nd PL, Apt 924  
Address

Miami/FL 33186  
City/State and Zip Code

ludur@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Duran at ( 786 ) 360 7400  
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

**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: LUDUR LLC

2. (a) Principal office address of limited liability company: 9001 SW 122 PLACE



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

Apt 924  
Miami FL, 33186

(b) Mailing address of limited liability company: 9001 SW 122 PLACE



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

Apt 924  
Miami FL, 33186

08/13/2009  
3. Date of filing/registration in Florida

L09000077988  
4. Document number

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

Registered Agent: Duran, Luis F Sr

Registered Office Address: 9001 SW 122 PLACE  
Apt 924  
Miami FL, 33186

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

**NEW** Registered Agent: Duran, Luis F Sr

**NEW** Registered Office Address: 2335 NW 107th Av.  
**(MUST BE FLORIDA STREET ADDRESS)** Suite 2M46 Office #102  
Doral, FL 33172

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

Luis F Duran

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.

Signature of Registered Agent

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

FILING FEE: \$25.00

FILE  
09 DEC -3 PM  
SECRETARY OF  
TALLAHASSEE