

## L09000080552

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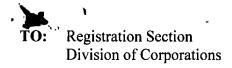
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D. BRUCE
APR 11 2012

**EXAMINER** 

## **COVER LETTER**



SUBJECT:	EPSON DERBY, LLC	
Na	ame of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Regi	stered Office Change and fee(s) are submitted for filing.	
Please return all correspondence con	cerning this matter to the following:	
ALBERTO ETTEI  Name of Person	DGUI	
ALETT15 LLC Firm/Company		
1600 PONCE DE LEON BLV	/D. SUITE 1025	
CORAL GABLES, FI	133134 SELLARASSE	
alett15.05@gmail E-mail address: (to be used for future annua	.com al report notification)  als matter, please call:	
For further information concerning th	nis matter, please call:	
ALBERTO ETTEDGUI  Name of Person	at ( 786 ) 350-1125	
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the f	ollowing 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 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: EPSON DERBY, LLC 1600 Ponce de Leon Blvd. 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 1025 Coral Gables, Florida 33134 1600 Ponce de Leon Blvd. (b) Mailing address of limited liability company: **Suite 1025** (Note: MAY BE POST OFFICE BOX) Coral Gables, Florida 33134 08/20/2009 L09000080552 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: FRANCISCO J. ARGUELLES Registered Agent: 201 Cross Street Registered Office Address: Miami Springs, FL 33166 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address; ALBERTO ETTEDGUI **NEW** Registered Agent: 1600 Ponce de Leon Blvd **NEW** Registered Office Address: Suite 1025 (MUST BE FLORIDA STREET ADDRESS) Coral Gables FL33134 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 Amin Saiden 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 Tam 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. BATO COTTES) Res Signature of Registered Agent

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