L09000088395

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

Office Use Only



800244363318

02/06/13--01005--025 **25.00

FEB 7 2013 T. HAMPTON

	OVED I ETTED			
TO: Registration Section Division of Corporations	OVERLETTER Change of address			
SUBJECT: RUMBO INVESTMENTS LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to the following.			
JOSEFA HERNANDEZ				
Name of Person				
Firm/Company				
3232 CORAL WAY APT	1502			
Address				
NALANAL EL 2244E				
MIAMI, FL. 33145 City/State and Zip Code				
·				
finacanal1@yahoo.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Josefa Hernandez	at (305) 338-1968			
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 Conv			

* 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: RUMBO INVESTMENTS LLC						
2	(-)	Data-11 - 66 44 61114-4 11-1-1114	2000 C LE IEUNE DD DIL 20			
۷.	(a)	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	CORAL GABLES FL 33134			
		(Note: MUST BE STREET ADDRESS)	OOTAL GABLEOT L 33104			
	(b)	Mailing address of limited liability company:	3232 CORAL WAY APT 1502			
	• /	(Note: MAY BE POST OFFICE BOX)				
			MIAMI FL 33145			
			L09000088395			
3.	Dat	te of filing/registration in Florida	4. Document number			
5.	(a)	Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:			
		Desistand Assets				
		Registered Agent:	JOSEFA HERNANDEZ			
		Registered Office Address:				
		registered office / idaress.	2950 SW 3RD AVE 7-B			
			MIAMI , FL 33129			
	(b)	Enter name of NEW Registered Agent and/or NEW	V Dagistanad Office address:			
	(0)	Enter name of MEAA Mesistered Ascist mid-of MEA	v Registered Office address.			
		NEW Registered Agent:				
NEW Registered Office Address:			2655 S LEJEUNE RD			
		(MUST BE FLORIDA STREET ADDRESS)	PH-2C CORAL GABLES FL 33134			
			,r L so to			
If ·	the l	imited liability company is not organized under the l	aws of the State of Florida, it is hereby			
co	nfiri	imited liability company is not organized under the l ned that after the change or changes are made, the Fl	orida street address of the registered office			
าก	d tha	a blicinace attice at the registered agent will be ident	ical. Or in the case of a Florida limited			
Illa the	DIIII	y company, it is nereby confirmed that the change(s)	was/were authorized by an allimative vote of secondariation or			
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						
Deh Versand						
Sig	naunc	e of a member or authorized representative of a member	어 등째를 다 하는 기계를 다 하			
The state of the s						
- <u>></u>		SEPA HERNBNOCZ or typed name of signee	- 호 첫빛 :			
$\frac{I}{co}$	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						
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.						
beh Hernanda						
Signature of Registered Agent						
	/ \	\mathcal{A}°	27 T-11-E EF 22214			
	/ Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					
	FILING FEE: 525.00					