## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000122794 3)))



H100001227943ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE TN

Account Number: I2000000146 Phone : (305)444-4994

Fax Number : (305)444-4977

\*\*Enter the email address for this business entity to be used for Siture annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE

NICLAT, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited ir to change its registered office or registered	
1. Name of the limited liability company:	NICLAT, L.L.C.	
2. (a) Principal office address of limited liability company:		
(Nate: MUST BE STREET ADDRESS)	1200 BRICKELL AVENUE SUITE 505 MIAMI, FL 33131	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	1200 BRICKELL AVENUE SUITE 505	
09/16/2009	L090000896247 -	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on		
Registered Agent:	MARRERO, JOSE C	
Registered Office Address:	1200 BRICKELL AVENUE SUITE 505	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEY</u> <u>NEW</u> Registered Agent:	RICHARDS & ASSOCIATES, P.A.	
NEW Registered Office Address: [MUST BE FLORIDA STREET ADDRESS]	2665 SOUTH BAYSHORE DRIVE SUITE 703 MIAMI ,FL 33133	
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		
as Eventua na a timomos de tintitisas conschezentaria e da a utaliber.		
JUAN CAZES Printed or typed name of signed	_	
I hareby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision of any familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to ner and complete performance of my duties, stifon as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change,	
Signature of Registered Agent  Division of Cornegations, P.O. Boy 632	77 Tallahossaa ET 39344	

FILING FEE: \$25.00

INHS 18 (05/08) -