L09000102392

(Req	uestor's Name)			
(Add	ress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Busi	iness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
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J. BRYAN

OCT - 4 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2010

WILFREDO PINERO SINCERE HOME BUYERS, LLC 10034 SW 137TH PL MIAMI, FL 33186

SUBJECT: SINCERE HOME BUYERS, LLC

Ref. Number: L09000102392

We have received your document for SINCERE HOME BUYERS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 410A00022626

10 OCT -1 PN 3:58
SECNLINGSES STATE

COVER LETTER

	ion Section of Corporations		
SUBJECT:	Sincere Hon Name of Li	mited Liability Company	
Dear Sir or Mada	am:		
The enclosed Re	gistered Agent/Registered Of	ffice Change and fee(s) are submitted f	for filing.
Please return all	correspondence concerning t	his matter to the following:	
Wil	Firm/Company	rs, LLC	
Mian	Address Ni, F1 33186 City/State and Zip Code Sincere home (to be used for future annual report no		10 OCT -1 PN 3:58 SECNILLANASSEE, FLORIDA
	rmation concerning this matte		
	Pinero Jame of Person	at (305) 77-8-523 Area Code & Daytime Telephone	
Registrati Division o Clifton Bo 2661 Exe	C/COURIER ADDRESS: ion Section of Corporations quilding centive Center Circle see, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed	d is a check for the followin	g amount:	
/ /	iling Fee Twas sent in a ior leter. How In I receive the ference?	\$55 Filing Fee & Certified	Сору

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: Sincered we begin to the limited liability company:

2. (a) Principal office address of limited liability compan	y:
(Note: MUST BE STREET ADDRESS)	10034 SW 137 Pl Miami, Fl 33186
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	PO BOX 164212
10/23/09	LB9880102392
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:
Registered Agent:	United States Corporation Agents, Inc
Registered Office Address:	13302 Winding Oaks Bld, #A- Tampa, Fl 33612
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	
NEW Registered Agent:	Wilfredo Piñero
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10034 SW 137 P/ Miami, F(33/86 ,FL
of the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change (so the members of the limited liability company or as other the operating agreement of the limited liability company.	Florida street address of the registered office stical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote straightful the articles of organization
Wil Redo Pinero Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the print I am familiar with and accept the obligations of my purpose that the sold of the provision of the provisio	
Ditt. 60 DOD	