## 11000019173

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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper

ami.casper@cscglobal.com

Date: November 2, 2015

Order#: 812747/025

Re: GEORGE, CHARLIE AND ROCCO, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please called a firm office.

INCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

a) _	6431 Pinetree Drive Circle (b) c/o Bloom		c/o Bloom Office LLC
<b>ω</b> , .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
			575 Madison Avenue, 10th Floor
	Miami Beach, FL 33141	<del></del>	New York, NY 10022
	02/18/2010		L10000019123
	Date of filing/registration in Florida	4.	Document number
(a)	Hector Alvarez III, Esquire		
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:
	3211 Ponce de Leon Boulevard, Suite 204	ADDDECS	· · · · · · · · · · · · · · · · · · ·
	Registered Office Address (MUST BE FLORIDA STREET	ADDKESS	
	0.1011		2015
	Coral Gables , FI	L <u>33134</u>	
			AHASSETARY
b)	Corporation Service Company	<del></del>	SS
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office ad	dress:
	•		
	1201 Hays Street		
	NEW Registered Office Address:		9: 30 STATE LORIDA
	Tallahassee , FI	(32301	
cha nt v /we artí	imited liability company is not organized under the latinge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the reging in the ling of the limited lings of the limited lings of the limited lings of the limited lings of the lings	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) littled liability company or as otherwise provided in liability company.
	15 Autyonisel Represented	~ <u>D</u>	quid Bloom, Antronized Represa. Printed or typed name of signee
_			
igna			t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been

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