# L10000040962

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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B. KOHR

OCT 23 2012

EXAMINER



### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 4, 2012

ALEXIS DIAZ DIFFERENT LLC 7185 N.W. 87TH AVENUE MIAMI, FL 33178

SUBJECT: DIFERENT L.L.C. Ref. Number: L10000040962



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

It is unclear to us which addresses you are attempting to change, and also a corporation form has been used.

Please complete, sign, and return the enclosed LLC AMENDMENT form on which you can make any needed change.

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

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Letter Number: 012A00024706

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: DIFERENT LLC  Name of Corporation
DOCUMENT NUMBER: L-100000 40962
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DIFERENT LCC
DIFERENT LCC Firm/Company
718510W 87AU.
718516W 87AU.  Address  Address  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexis Diaz at (305) 798 4170  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

#### **COVER LETTER**

COVER LETTER
TO: Amendment Section Division of Corporations
SUBJECT: DIFERENT LLC  Name of Corporation
DOCUMENT NUMBER: L-100000 40962
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Alexis Diaz
Name of Contact Person  DIFCECN TLCC  Firm/Company
7185 KW 87 AU.  Address  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexis Dia 2  Name of Contact Person  at (305) 798 4170  Area Code & Daytime Telephone Number

Mailing Address: Amendment Section **Division of Corporations** 

P.O. Box 6327

Enclosed is a \$35.00 check made payable to the Department of State.

Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Different CCC
2. The principal office address: 11841 SW 103 Lm 2mam,  FC. 33186
3. The mailing address (if different): 7185 WW 87 AU. Man,  FC 33178
4. Date of incorporation/qualification: 04/16/201 Bocument number: L 100000 40962
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
New Mailing address; 8432 NW
66 ST. mann, FC 33166
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
New Mailing Address 8432 NW 50 10 10 10 10 10 10 10 10 10 10 10 10 10
66 ST. 2mam, FL 33166 P.O. Box NOT acceptable
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an office or director  Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Alexin R. Will Sep/11/2012 Signature of Registered Agent Sep/11/2012
If signing on behalf of an entity:
/ Typed or Printed Name * * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (03/12)