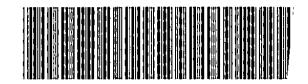
1100000 49716

(Re	equestor's Name)	
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ad	ldress)	,,
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900334941069

19/03/19--01005--006 **

SECRETARY OF STATE

OCT 21 2019

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Division of Corporations LAPALOMA FINANCIAL SERVICES&WIRELESS.LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Bernateau Toussaint Name of Person La Paloma financial services & wireless, Ilc Firm/Company 7214 Southgate Blvd Address North Lauderdale, Fl 33068 City/State and Zip Code lapalomaf2@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BERNATEAU TOUSSAINT Area Code & Davtime Telephone Number Name of Person MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy **☑** \$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR I LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liab submits the following statement in order to change its registered office or registered agent, or both, is Florida.

	ame of the limited liability company: Lapaloma f 7214 Southgate Blvd		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) North Lauderdale, FI 33068	(b)	Mailing address of limited fiabilit (Note: MAY BE POST OFFI
	5/10/2010	L100	000049716
3.	Date of filing/registration in Fiorida	4.	Document number
5. (a)	TOUSSAINT, BERNATEAU MANAGER		
	Registered Agent and Registered Office shown on the records 7214 SOUTHGATE BLVD	of the Fiorida Dept.	of State:
	Registered Office Address	ET ADDRESS)	SECR TALL A
	NORTH LAUDERDALE	FL_33068	HASSE
(b)	TOUSSAINT, BERNATEAU		10 N
(**)	Enter name of NEW Registered Agent and/or NEW Registe	red Office address:	JE STATI
	7214 SOUTHGATE BLVD		0m -
	NEW Registered Office Address:		
	NORTH LAUDERDALE		
		_{F1} 33068	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirme the change or changes are made, the Florida street address of the registered office and the business office of agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

BERNALS AV TOUS FAIR Printed or typed name of signe

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to exprovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar value obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documen to merely reflect a change in the registered office address. I hereby confirm that the limited liability companotified in writing of this change.

Signature of Registered Agent