

L10000057751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400285518734

05/09/16--01022--029 **55.00

FILED

2016 MAY 23 P 4:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY 24 2016
J. BRUCI



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2016 MAY 23 PM 2:47
TALLAHASSEE, FLORIDA

May 10, 2016

ALEXANDRA VANESSA PENAGOS
9405 S ORANGE BLOSSOM TRAIL BLDG A
ORLANDO, FL 32837

SUBJECT: GAJEGA "LLC"
Ref. Number: L10000057751

We have received your document for GAJEGA "LLC" and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 016A00009781

2016 MAY 23 P 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gajega, LLC
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:

Alexandra Vanessa Penagos

Name of Person

Gajega, LLC

Firm/Company

9405 South Orange Blossom Trail Bldg A

Address

Orlando FL 32837

City/State and Zip Code

autocity9405@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexandra Vanessa Penagos at (407) 579-4545

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

2018 MAY 23 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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.

1. Name of the limited liability company: Gajega, LLC
2. (a) 9405 South Orange Blossom Trail Bldg A Orla
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
- (b) 14914 Honeycrisp Lane Orlando FL 32827
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

3. 5/28/2010 Date of filing/registration in Florida 4. L10000057751 Document number

5. (a) Alexandra Vanessa Penagos
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

14914 Honeycrisp Lane

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

Orlando, FL 32827

- (b) Guillermo Penagos
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

14914 Honeycrisp Lane

NEW Registered Office Address:

Orlando, FL 32827

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]
Signature of a member or authorized representative of a member

Alexandra V. Penagos
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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

FILED
2016 MAY 23 P 4: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA