

L100000122111

(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



500218613365

01/19/12--01011--005 **100.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 19 AM 10:26

L. Hampton JAN 20 2012

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: Optimus US 981 N.E. 169th St., L.L.C.

2. (a) Principal office address of limited liability company: 11601 Biscayne Blvd.

(Note: MUST BE STREET ADDRESS)

Unit 3204

Miami, FL 33184

(b) Mailing address of limited liability company: 11601 Biscayne Blvd.

(Note: MAY BE POST OFFICE BOX)

Unit 3204

Miami, FL 33184

11-24-10

L10000122111

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: CT Corporation System

Registered Office Address: 1200 S. Pine Island Rd.
Plantation, FL 33324

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

NEW Registered Agent:

Carlos Castro

NEW Registered Office Address:

c/o Castro & Ramirez P.A.

(MUST BE FLORIDA STREET ADDRESS)

1805 Ponce de Leon Blvd., #500

Coral Gables, FL 33134

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.

OPTIMUS US PROPERTIES HOLDINGS, L.L.C.

Signature of a member or authorized representative of a member

BY: RONAN GUILFOYLE, ITS MANAGER

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 608, 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 of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 19 AM 10:26

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: Optimus US 981 N.E. 169th St., L.L.C.

2. (a) Principal office address of limited liability company: 11601 Biscayne Blvd.

(Note: MUST BE STREET ADDRESS)

Unit 3204

Miami, FL 33184

(b) Mailing address of limited liability company: 11601 Biscayne Blvd.

(Note: MAY BE POST OFFICE BOX)

Unit 3204

Miami, FL 33184

11-24-10

3. Date of filing/registration in Florida

L10000122111

4. Document number

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

Registered Agent:

CT Corporation System

Registered Office Address:

1200 S. Pine Island Rd.

Plantation, FL 33324

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

NEW Registered Agent:

Carlos Castro

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

c/o Castro & Ramirez P.A.

1805 Ponce de Leon Blvd., #500

Coral Gables, FL 33134

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.

OPTIMUS US PROPERTIES HOLDINGS, L.L.C.

Signature of a member or authorized representative of a member

BY: RONAN GUILFOYLE, ITS MANAGER

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 608, 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 of Registered Agent

CARLOS CASTRO

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 19 AM 10:00