## L11000015058

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EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	UBJECT: Apsides LLC				
	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The en	nclosed Registered Agent/Registered	Office C	Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:					
	Carlos Alama				
	Carlos Alamo Name of Person				
	Traine of Terson				
	Apsides LLC				
	Firm/Company				
	1000 Brickell Ave. Suite 72	20			
	Address				
	Miami FL, 33131				
	City/State and Zip Code				
	calamo7@gmail.com				
E	Calamo7@gmail.com  E-mail address: (to be used for future annual report notification)				
For fu	rther information concerning this ma	tter, plea	se call:		
	Carlos Alamo	at (	305 )	600-3304	
	Name of Person		Area C	Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		MAITIN	G ADDRESS:	
	Registration Section			ion Section	
	Division of Corporations		-	of Corporations	
	Clifton Building		P.O. Box		
•	2661 Executive Center Circle Tallahassee, Florida 32301		Tallahass	see, Florida 32314	

Enclosed is a check for the following amount: \$25.00

## 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:	Apsides LLC	
2. (a) Principal office address of limited liability company	1000 Brickell Ave suite 720	
(Note: MUST BE STREET ADDRESS)	Miami FL 33131	
(b) Mailing address of limited liability company:	1000 Brickell Ave suite 720	
(Note: MAY BE POST OFFICE BOX)	Miami FL 33131	
O2/04/11  3. Date of filing/registration in Florida	L11000015058  1. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Carlos Alamo	
Registered Office Address:	701 Brickell Ave. Suite 1550 Miami FL 33131	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	V Registered Office address: Carlos Alamo	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1000 Brickell Ave. Suite 720	
(MUSI BE I LORIDA STREET ADDRESS)	Miami ,FL33131	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwork or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
CARLOS ALAMO Printed or typed name of signee	. 주유 자꾸 이 자꾸 이 자꾸 이 가지 않는 사람들이 되었다.	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, thereby confirm that the limited liability company Signature of Registered Agent	gree to act in this capacity. I further agree to per and complete performance of my duffes, itin as registered agent as provided for in the registered office has been notified in writing of this change.	