

L11000016634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

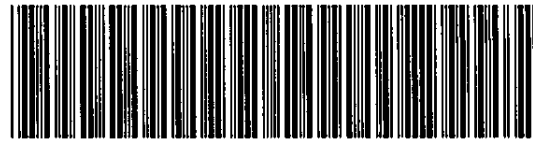
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FILED
2016 DEC -5 AM 11:22
RECEIVED
SECURITY DIVISION
FBI - ALBANY

M. MILLIGAN
DEC 12 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2016

MARIAZELL H. ARIAS
1209 QUEENS HARBOR BLVD.
JACKSONVILLE, FL 32225

SUBJECT: SHELLCRETE BUILDERS, LLC
Ref. Number: L11000016634

RECEIVED
2016 DEC -5 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 616A00024500

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shellcrete Builders, 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:

Mariazell H. Arias

Name of Person

N/A

Firm/Company

1209 Queens Harbor Blvd.

Address

Jacksonville, FL 32225

City/State and Zip Code

marias@bdico.com

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

For further information concerning this matter, please call:

Mariazell H. Arias

Name of Person

at (786) 325-4526

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

INHS18 (2/14)

* Your agency is holding on to the previously mailed check for the filing fees.

**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: Shellcrete Builders, LLC

2. (a) 7311 NW 12 Street, # 4, Miami, FL 33126

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 1209 Queens Harbor Blvd., Miami, FL ~~33126~~ 32225

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

02/08/2011

3. Date of filing/registration in Florida

L11000016634

4. Document number

5. (a) Mariazell H. Arias

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

7320 NW 12 Street, Suite 200, Miami, FL 33126

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

(b) Mariazell H. Arias

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1209 Queens Harbor Blvd.

NEW Registered Office Address:

Jacksonville

FL

32225

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

Teobaldo Rosell

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