

L11000019175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

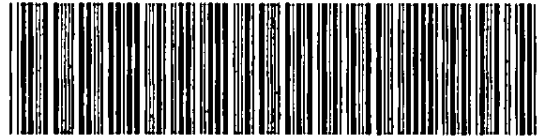
(Document Number)

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MAY 25 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2018

MAXIMO VALENCIA
808 CYPRESS BLVD, APT 307
POMPANO BEACH, FL 33069

SUBJECT: FCNM LLC
Ref. Number: L11000019175

We have received your document for FCNM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

The new registered agent need to sign.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 118A00008752

RECEIVED

2018 MAY 25 PM 12:53

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2018

MAXIMO VALENCIA
808 CYPRESS BLVD, APT 307
POMPANO BEACH, FL 33069

SUBJECT: FCNM LLC
Ref. Number: L11000019175

We have received your document for FCNM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 418A00007217

RECEIVED
2018 APR 26 AM 11:24
DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FCNM 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:

Maximo Valencia

Name of Person

FCNM LLC

Firm/Company

808 CYPRESS BLVD APT. 307

Address

POMPANO BEACH, FL 33069

City/State and Zip Code

maxvalencia@gmail.com

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

For further information concerning this matter, please call:

Maximo Valencia

Name of Person

at (813) 786-230-9749
• 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

**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: FCNM LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

808 Cypress Blvd, Apt 307

Pompano Beach, FL 33069

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

808 Cypress Blvd, Apt 307

Pompano Beach, FL 33069

02 / 14 / 2011

L11000019175

3. Date of filing/registration in Florida

4. Document number

5. (a) Alberto Siblesz

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

999 Brickell Ave, Suite 1006

Miami, FL 33131

(b)

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

Maximo Valencia

NEW Registered Office Address:

808 Cypress Blvd, Apt 307

Pompano Beach, FL, FL 33069

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.

Maximo Valencia

Signature of a member or authorized representative of a member

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 of Registered Agent