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2013 JAN 15 PN 12: 2 SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations	•		
SUBJECT: 1RepairStop LLC			
Name of I	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Alejandro Berrio			
Name of Person			
Firm/Company			
6524 sw 41 place			
Address			
Davie, FI 33314			
City/State and Zip Code			
alejoberrio@gmail.com			
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matt	ter, please call:		
Alejandro Berrio	at (954) 305-9909		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building	Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following	ng 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 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.	Nar	ne of the limited liability company: 1RepairStop LLC				
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	8410 w flagler st #209 Mlami fl 33144	2013 JJ		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8410 w flagler st # 209 Miaml FI 33144	ASSET DE		
02-	-15 -2 0	H	L11000020016	12: 21 07415		
3.	Dat	e of filing/registration in Florida	. Document number	100		
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida De	ept. of State:		
		Registered Agent:	Stefano J DeGiorgio			
		Registered Office Address:	8410 w flagler st # 209 miami fl 33144			
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
		NEW Registered Agent:	Alejandro Berrio			
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8410 w flagler st # 209			
		*	miami	,FL_33144		
co an lia the	nfin d the ibilit e me e ope	imited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the re	egistered office		
Oig	şnatur	e of a member of authorized representative of a member				
		De Giorgio or typed name of signee	-			
_	٠	by accept the appointment as registered agent and as with the provisions of all statutes relative to the proving a manufacture of my poster 608, F.S. Or, if this document is being filed to means, I hereby confirm that the limited liability company are of Registered Agent	gree to act in this capacity. per and complete performa ition as registered agent as rely reflect a change in the r has been notified in writing	I further agree to nce of my duties, s provided for in registered office g of this change.		

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