L1100000ab433

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Sta	tus	
Special Instructions to Filing Officer:		

Office Use Only



500234856475

05/11/12--01007--010 **25.00

FILED
12 MAY 11 PM 3: 24
SECRETARY OF STATE
THE ARXIVEE FLORIDA

C. LEWIS

MAY 1 4 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	LC	Beru Services L.L.C Limited Liability Company
	Traine of	Emilion Diagnos Company
Dear !	Sir or Madam:	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to the following:
	Lina M. Rubio	
	Name of Person	
	Beru Services L.L.C	
	Firm/Company	
	2555 NW 118th Terrace	
	Address	
	Miramar Florida, 33025	
	City/State and Zip Code	
E	beruservices@gmail.com -mail address: (to be used for future annual report	notification)
For fi	urther information concerning this mat	tter, please call:
.,4	Lina M. Rubio	at (786) 543-7916
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	,
	Enclosed is a check for the following	ing amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LÍMITED 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:	Beru Services L.L.C		
2. (a) Principal office address of limited liability company	y: 18245 nw 68th ave Ste 216		
(Note: MUST BE STREET ADDRESS)	Miami Fl, 33015		
(b) Mailing address of limited liability company:	18245 nw 68th ave Ste 216		
(Note: MAY BE POST OFFICE BOX)	Miami FI, 33015		
2/17/11	L11000020933 =		
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:	Lina M Rubio		
Registered Office Address:	18245 nw 68th ave Ste 216 2 2 Miami FI 33015		
NEW Registered Agent: NEW Registered Office Address:	2555 SW 118th Terrace		
NEW Registered Office Address: (MUST BE FLORIDA, STREET ADDRESS)	2555 SW 118th Terrace		
	Miramar ,FL33025		
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 of the operating agreement of the limited liability company. Signature of a member or authorized representative of a member			
Lina M. Rubio Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.		

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