

L11000023825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
AUG - 1 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **359 ALCAZAR AVENUE 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:

Ramzi Asfour

Name of Person

359 Alcazar Avenue LLC

Firm/Company

359 Alcazar Avenue

Address

Coral Gables, Florida 33134

City/State and Zip Code

359alcazarave@gmail.com

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

For further information concerning this matter, please call:

Ramzi Asfour

Name of Person

305 446-2323

at ()

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

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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: 359 ALCAZAR AVENUE LLC

2. (a) Principal office address of limited liability company: 359 ALCAZAR AVENUE
CORAL GABLES, FL 33134
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 359 ALCAZAR AVENUE
CORAL GABLES, FL 33134
(Note: MAY BE POST OFFICE BOX)

2/23/2011

L11000023825

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:

RAMZI ASFOUR

Registered Office Address:

8095 NW 12TH STREET, SUITE 105
MIAMI, FL 33126

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

NEW Registered Agent:

RAMZI ASFOUR

NEW Registered Office Address:

359 ALCAZAR AVENUE

(MUST BE FLORIDA STREET ADDRESS)

CORAL GABLES, FL 33134

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.

Ramzi Asfour
Signature of a member or authorized representative of a member

RAMZI ASFOUR, MGRM

Printed or typed name of signer

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 608, 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.

Ramzi Asfour
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2013

RAMZI B. ASFOUR, P.E.
359 ALCAZAR AVENUE LLC
359 ALCAZAR AVENUE
CORAL GABLES, FL 33134

SUBJECT: 359 ALCAZAR AVENUE LLC
Ref. Number: L11000023825

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for 359 ALCAZAR AVENUE 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 213A00015414