

L110000043278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CIELO, BOLITA & LOBITOS "L.L.C"  
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:

RAFAEL CERVANTES  
Name of Person

Firm/Company

ONE NORTH OCEAN BLVD # 201  
Address

POMPANO BEACH FL 33062  
City/State and Zip Code

rafael@cervanteslebrijasc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAEL OR PATTY CERVANTES at ( 954 ) 9347057  
Name of Person 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 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: CIELO, BOLITA & LOBITOS "L.L.C"
2. (a) Principal office address of limited liability company: ONE NORTH OCEAN BLVD # 201

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

POMPANO BEACH, FL 33062

- (b) Mailing address of limited liability company:

ONE NORTH OCEAN BLVD # 201

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

POMPANO BEACH, FL 33062

04/11/2011

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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:

PATRICIA MORRISON

Registered Office Address:

2025 BRICKELL AVENUE # 1205  
MIAMI, FL 33129

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

**NEW Registered Agent:**

RAFAEL CERVANTES

**NEW Registered Office Address:**

ONE NORTH OCEAN BLVD # 201

**(MUST BE FLORIDA STREET ADDRESS)**

POMPANO BEACH, FL 33062

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 action 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.

RAFAEL CERVANTES -  
Signature of a member or authorized representative of a member

RAFAEL CERVANTES -  
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. On 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**