

L11000076992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

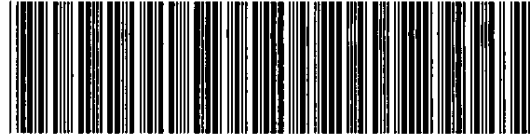
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500264143135

09/15/14--01018--021 **35.00

FILED

14 NOV - 5 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-5-14

10/21/14

CLM
9-22-14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALBICELETE CONSULTING 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:

Juan Pablo Cappello

Name of Person

Private Advising Group, P.A.

Firm/Company

600 Brickell Avenue, Suite 1607

Address

Miami, FL 33131

City/State and Zip Code

jp@private-advising.com

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

For further information concerning this matter, please call:

Ines Morales

Name of Person

at (786) 292-1599

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

FILED
14 NOV -5 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: ALBICELESTE Consulting LLC

2. (a) 600 Brickell Avenue

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Suite 1607

MIAMI, FL 33131

(b) 600 Brickell Avenue

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Suite 1607

MIAMI, FL 33131

3. 7-05-2011
Date of filing/registration in Florida

4. L11000076992
Document number

5. (a) Greenberg Traurig P.A.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

333 S.E. 2nd Avenue, 44th Floor

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MIAMI, FL 33131

(b) Private Advising Group, P.A.

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

600 Brickell Avenue

NEW Registered Office Address:

Suite 1725

MIAMI, FL 33131

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.

Gabriela Ruggeri
Signature of a member or authorized representative of a member

Gabriela Ruggeri
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 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]
Signature of Registered Agent

FILED
14 NOV -5 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FL 32314



RECEIVED

14 OCT 34 AM 9:47

FLORIDA DEPARTMENT OF STATE
Division of Corporations TALLAHASSEE, FLORIDA

October 21, 2014

JUAN PABLO CAPPELLO
PRIVATE ADVISING GROUP, P.A.
600 BRICKELL AVENUE, SUITE 1607
MIAMI, FL 33131

SUBJECT: ALBICELESTE CONSULTING LLC
Ref. Number: L11000076992

FILED
14 NOV -5 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ALBICELESTE CONSULTING 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):

The registered agent must sign accepting the designation.

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) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 614A00022525

*Please see enclosed
the form!*

RECEIVED
14 NOV -5 AM 10:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA