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D. BRUCE AUG 15 2020

COVER LETTER

TO: Registration Section Division of Corporations			
EQUILEASING,LLC SUBJECT:			
	ne of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
DANIEL LOPEZ			
Name of Person			
EQUILEASING.LLC			
Firm/Company	·		
4825 SW 75 AVE.			
Address			
MIAMLFLORIDA 33155	<u></u>	SEC SEC	_
City/State and Zip Code		がら	
GINAL825@AOL.COM	7		3
E-mail address: (to be used for future annu	ual report notification)) () ()	
For further information concerning this matter,	please call:	rio 7	M 20 AM 10: 45
DANIEL LOPEZ	786 547-0990 at ()	, <u>i-</u> i	.π
Name of Person	Area Code & Daytime Telephone Nun	nber	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following :	amount:		
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)

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. N	ame of the limited liability company:EQUILEASING.	LLC				
2. (a)	1825 SW 75 AVF		(b) 4825 SW	775 AVE.		
2. (ar	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limite (Note: MAY BE POS		
	MHAMI, FLORIDA 33155	_	MIAMI,	FLORIDA 33155		
	SEPTEMBER 16, 2011		L1100010	6810		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records of DANIEL LOPEZ Registered Office Address (MUST BE FLORIDA STREET). 4342 SW 74 AVE			ate:		
	MIAMI	33155		_	. ~J	
(b)	Enter name of NEW Registered Agent and/or NEW Registered DANIEL LOPEZ NEW Registered Office Address:	_ l Office	address:		SECRETARY DE STALL	
	4825 SW 75 AVE.			_	FAE 55	
	MIAMI FL	33155				
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of the l	ered office a company, it imited liabil	and the business office is hereby confirmed ity company or as oth	e of the registered that the change(s)	
	familia	D	ANIEL LOP			
I here provis the obtonet notific	ature of a member or authorized representative of a member or by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided with referring a change in the registered office address. It is writing of this change in the registered office address. It is writing of this change.	perfor	mance of mi	v duties, ånd 1 am fam	e to comply with t illiar with and acc	ent