## 211000107047

| (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:

A. LUNT

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EXAMINER

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## **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |
|--|---|
| SUBJECT: 23   5W 24 5T-1   | 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  | g this matter to the following:   |
| marco Dessimone  Name of Person  |   |
| Firm/Company   |   |
| 2311 S4) 24 ST-  | DEC -9  |
| Address  M.ami FC 33145  City/State and Zip Code   | -9 PH (STATE OF STATE)  |
| E-mail address: (to be used for future annual report   | notification)   |
| For further information concerning this mat  | tter, please call:  |
| marco Dessimone Name of Person   | at (365 ) 915 - 7509  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 followi  | ng 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: 2311 54   | 124 STREET LLC  |
|---|---|
| 2. (a) Principal office address of limited liability compa  |   |
| (Note: MUST BE STREET ADDRESS)  | Suite 300<br>miami FC 33131   |
| (b) Mailing address of limited liability company:   | PO BOX 45-0392  |
| (Note: MAY BE POST OFFICE BOX)  | miami Fl. 33145 U.S.  |
| 9/19/201\ 3. Date of filing/registration in Florida   | <u>L11000107047</u> 4. Document number  |
| • •   |   |
| 5. (a) Registered Agent and Registered Office shown of  | 4   |
| Registered Agent:   | MGF Registered Agents INC   |
| Registered Office Address:  | 1000 Brickell Avenue  |
|   | miami F(: 3313) US:   |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>   | EW Registered Office address  |
| NEW Registered Agent:   | marco Dessimones T  |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)   | 2311 SW 24 ST 85 1  |
| (MOOT DE LEGIS), STANDA TIDENCES,   | 1912 D  |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. | e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization  |
|   | <u>_</u>  |
| Signature of a member or authorized representative of a member  |   |
| MARCO Dessimone   | <del></del>   |
| Printed or typed name of signee   | The second second second  |
| I hereby accept the appointment as registered agent an<br>comply with the provisions of all statutes relative to the<br>and I am familiar with and accept the obligations of my<br>Chapter 608, F.S. Or, if this document is being filed to<br>address, I hereby confirm that the limited liability comp  | a agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change. |

Signature of Registered Agent