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JUN - 3 2014

R. WHITE

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJI	ANGIE V ENTERPRISES, L	.LC			
SCL	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning the	s matter to the following:			
IVAN	J. PARRON				
	Name of Person				
PARE	RON & ASSOCIATES, PL				
	Firm/Company	<del></del>			
175 S	SW 7TH STREET, SUITE 1210				
	Address	<del></del>			
MIAN	11, FL 33130				
	City/State and Zip Code				
IP@F	PARRONLAW.COM				
E	-mail address: (to be used for future ann	ual report notification)			
For fur	rther information concerning this matter,	please call:			
IVAN	J. PARRON	305 851-2320			
	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			
INHSI	8 (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. Na	me of the limited liability company: ANGIE V ENT	ERPR	ISES, LI	.C			<u>_</u>
2. (a)	175 SW 7TH STREET, SUITE 1210	(b	175 SV	W 7TH STREET,	SUITE 1	210	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	<i></i>	Mailing address of limit	•		
	MIAMI, FL 33130	_	MIAMI,	FL 33130			
	10/18/2011	_	 L110001	19227			
3.	Date of filing/registration in Florida	4.	·	Document number	r	<del></del>	
5. (a)	P & A REGISTERED AGENTS, LLC						
,, ( <b>a</b> )	Registered Agent and Registered Office shown on the records of the 175 SW 7TH STREET  Registered Office Address (MUST BE FLORIDA STREET A						
	SUITE 1810	<u>DDRESS)</u>	•		<del></del> ,		
		33130	<del></del>	_		<b></b>	
(b)	P & A REGISTERED AGENTS, LLC			_		20	
	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	ress:			**************************************	5
	175 SW 7TH STREET					*** 1/3	
	NEW Registered Office Address:			_	1-	Œ	
	SUITE 1210			<u> </u>			
	MIAMI , FL	33130		_			
he char agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	the regist bility cor f the limi imited li	tered office mpany, it is ted liability ability con	e and the business of is hereby confirmed ty company or as oth	office of the that the cha herwise pro	registe	ered
_	ure of a member or authorized representative of a member			Printed or typed name	•		
provision he obli o mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act performa for in C ereby co	in this cap nce of my hapter 60. nfirm that	pacity. I further agr. duties, and I am fan 5, F.S. Or, if this do the limited liability	ee to compi niliar with cument is i company h	ly with and acc being fi ias beei	the cept led n
Signatu	e of Registered Agent						
	Division of Corporations P.O. B	ox 6327	Tallaha	ssee, FL 32314			

**FILING FEE: \$25.00** 

INHS18 (2/14)