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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2021 SEP -2 AM 10:29  
SEC. CLERK OF STATE  
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CARIDACA 79 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:

SHYAM SHANKAR  
Name of Person

Firm/Company

1040 BISCAYNE BLVD, APT - 1403  
Address

MIAMI FL - 33132  
City/State and Zip Code

shyam7shankar@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHYAM SHANKAR at ( 646 ) 259 1796  
Name of Person Area Code & Daytime Telephone Number

**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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
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: CARIOCA 79 LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

1040 BISCAYNE BLVD, APT-1403  
MIAMI FL - 33132

1040 BISCAYNE BLVD, APT-  
MIAMI, FL - 33132

3. 5/4/2012 4. LI2 0000 60622  
Date of filing/registration in Florida Document number

5. (a) LUCIANA B CARRARO  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1577 BAY ROAD, # 203  
MIAMI BEACH, FL 33139

(b) SHYAM SHANKAR  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1040 BISCAYNE BLVD, APT-1403  
NEW Registered Office Address:

MIAMI, FL 33132

FILED  
2021 SEP -2 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after 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 the articles of organization or the operating agreement of the limited liability company.

Shyam Shankar SHYAM SHANKAR  
Signature of a member or authorized representative of a member 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 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.*

Shyam Shankar  
Signature of Registered Agent