112000093444

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
:		!
- in		

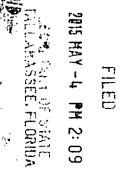
Office Use Only



600272340326

05/04/15--01017--027 **25.00

Charge



PSP115

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Tith Enterpri	SeS. LLC nited 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:			
Mes Rodingue E			
Titi Enterprises			
19711 NW 4th Ave			
Miami, FL 33/6 City/State and Zip Code	9		
E-mail address: (to be used for future annual repo			
For further information concerning this matter, please call:			
Name of Person at (at (786) 397 9482. 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		
Englosed 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 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 Jiability company: Tith Enterprises LLC
2. (a)
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
19711 NW 449 KM P.D. Pry 694792
Minni El 33/1-9. Minni El 337/1-9
MILLIAN, P.C. SSEET
4/30/15. 212000093444
3. Date of filing/registration in Florida 4. Document number
5. (a) Kainundo Munoz
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
100 11 1(1) 1/4 //20 # 50° + 10°
11/11/00 7
MIRM ,FL 33/69.
(b) Mes Kodriguez.
Enter name of NEW Registered Agent and/or NeW Registered Office address:
NEW Registered Office Address:
19711 NW 4th Me.
Minni
11/1414 , FL 33/69.
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 of the operating agreement of the limited liability company.
Ines Hadriquez
, , , , , , , , , , , , , , , , , , ,
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 he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed o 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 of Registered Agent
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00