

L12000096833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

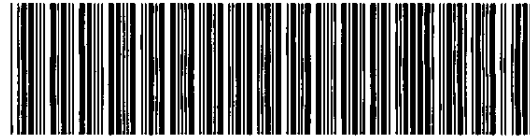
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
14 JUL 15 PM 3:29

LLC  
PA Change  
07-16-14  
DC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 JUL 15 AM 8:59

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

June 25, 2014

ALFONSO MEJIAS  
MIAMI OPEN CITY TOUR, LLC  
5400 NW 32 AVE. #2  
MIAMI, FL 33142

SUBJECT: MIAMI OPEN CITY TOUR, LLC  
Ref. Number: L12000096833

We have received your document for MIAMI OPEN CITY TOUR, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The business entity that you are forming cannot serve as its own registered agent. You may designate an individual or another business entity with an active registration or filing with this office. The newly designated registered agent must have a Florida street address and must sign accepting the designation. Please amend your document accordingly.

There is a fee of \$25.00 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II

Letter Number: 614A00013823

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Miami Open City Tour 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:

Alfonso Mejias  
Name of Person

Miami Open City Tour LLC  
Firm/Company

5400 NW 32 Ave #2  
Address

Miami, FL 33142  
City/State and Zip Code

amejias@julia.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfonso Mejias at (305) 779-2420  
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

**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 liability company: Miami Open City Tour, LLC

2. (a) 5400 NW 32 Ave # 2 (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**)

Miami, FL 33142

3. July 26, 2012 4. L12000096833  
Date of filing/registration in Florida Document number

5. (a) NRAI Corporate Services  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

515 East Park Ave

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Tallahassee, FL 32301

(b) Alfonso Jesus Mejias San Nicolas

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5400 NW 32 Ave

**NEW Registered Office Address:**

Bay # 2

Miami, FL 33142

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 or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

ALFONSO JESUS MEJIAS SAN NICOLAS  
Printed or typed name of signee

*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 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.*

[Signature]  
Signature of Registered Agent