## 12000108934

	<u>:</u>	ナ		
	(Re	questor's N	Name)	
	(Ad	dress)		
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J. SAULSBERRY EXAMINER

OCT 3 0 2013

## **COVER LETTER**

1. 4		
	со	VER LETTER
•	TO: Registration Section Division of Corporations	
	SUBJECT: Trading R.	etail LCC nited Liability Company
	Dear Sir or Madam:	mica Blasmy Company
	The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
	Please return all correspondence concerning th	-
	And Cataline Name of Person	Patron
	Trading Retai	2
	U341 Sedgew	yck Gr. W,
	Davie to 33332 City/State and Zip Code	51 E S S S
	Catalina Otrading v E-mail address: (to be used for future annual report note	etail.com
	For further information concerning this matter	, please call:
	Catalina Pahon Name of Person	at (305_812_4910 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

□ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	er to change its registered office or registered
1. Name of the limited liability company: Tradir	rg Ketail Lile
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	•
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
08 23 20 12	L12000108934
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Andrea C Mayorca
Registered Office Address:	500 bricken the ste 23
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address:  Catalina Patrom  1034   Sedgewyck Cir. W  Davie, FL  ,FL3333
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company.  Signature of member or authorized representative of a member	Torida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Printed or typed name of signee	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compar	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	J 22. 2 / W/10/0