F19000113133

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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September 14, 2016

MARCELO EDUARDO ALQUEZAR 100 LINCOLN ROAD #425 MIAMI BEACH, FL 33139-2013

SUBJECT: TAMANACO GROUP LLC

Ref. Number: L12000112133

We have received your document for TAMANACO GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 916A00019679

COVER LETTER

FO: Registration Section Division of Corporations		
SUBJECT: Tamanaco Group 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:		
Hernan Osso Name of Person		
Tamanaco Group LLC Firm/Company		
4010 San Amaro Drive		
Coral Gables, FL 33146 City/State and Zip Code		
5 Gomez @ MLRIVERO COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Manuel Rivero at (305) 443-8500 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
□ \$25 Filing Fee & Certified Copy		

INHS18 (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: Tamanaco Group LLC
2. (a)	100 LINCOLN Road #425 (b) LOO LINCOLN ROad #4.
``	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami Beach FL 33139 Miami Beach FL 3313
3.	08/31/20/2
۵.	
5. (a)	Marcelo Eduardo Higuetar Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	100 LINCOLD Road # 425 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Miami Beach FL 33139
(L)	Hernan Osso
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	STATE LORID
	NEW Registered Office Address:
	4010 San Amaro Drive
	Coral Gables. Fl 33146
the cha agent v was/wa	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in itself of organization or the operating agreement of the limited liability company.
\	ture of a member of authorized representative of a member Marcelo Alguezar Printed outped name of signee
_	
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this change
<u>x</u>	WW of Registered Agent
	Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)