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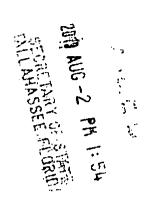
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COVER LETTER

	COVER I	LETTER
TO: Registration Section		c2.
Division of Corporations		
ROCHELA LLC SUBJECT:		
	e of Limited I.	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ce Change and	I fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the	following:
Alejandra Marquez Villa		
Name of Person		
AMV Legal Group P.A.		
Firm/Company		
2450 Hollywood Blvd, Suite 300		
Address		
Hollywood FL, 33020		
City/State and Zip Code		
info@amvlegalgroup.com		
E-mail address: (to be used for future ann	ual report noti	fication)
For further information concerning this matter.	please call:	
Alejandra Marquez Villa	954 at (2539695
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	Re Di P.o	AILING ADDRESS: egistration Section lvision of Corporations O. Box 6327 allahassee, Florida 32314
Enclosed is a check for the following	amount:	
□ \$25 Filing Fee	□ \$	55 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. N	ame of the limited liability company: ROCHELA LL	.C	
2. (a)		(b)	
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: M.AY BE POST OFFICE BOX)
3.	10/23/2012 Date of filing/registration in Florida	L12	2000134611 Document number
5. (a)	AMV Legal Group P.A.		
J. (u)	Registered Agent and Registered Office shown on the records of t	he Florida Dep	t. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	ALL MASSEE
	Hollywood	33021	7-2
	,1 L		
(b)			
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	: SEE 5
	AMV Legal Group P.A.		il.
	NEW Registered Office Address:		
,	2450 Hollywood Blvd, Suite 300		
	Hollywood, FL	33020	
the cha agent v was/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	the registere bility compa f the limited	d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
Signa	ture of a member or authorized representative of a member	Antonic	Printed or typed name of signee
the obl to mer notified	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I have the control of this change.	ee to act in to performance I for in Chap tereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
	Division of Corporations P.O. E	30x 6327	allahassee, FL 32314

FILING FEE: \$25.00