

L12000158054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2015 NOV 20 P 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 5, 2015

CHARLES MOORES  
16-A POINCIANA AVENUE  
ST. AUGUSTINE, FL 32084

SUBJECT: INTEIREZA PROPERTY SOLUTIONS LLC  
Ref. Number: L12000158054

We have received your document for INTEIREZA PROPERTY SOLUTIONS 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).

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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 Mason  
Regulatory Specialist II

Letter Number: 315A00023442

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INTERAZA Property Solutions 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:

Charles Moores  
Name of Person

INTERAZA Property Solutions LLC  
Firm/Company

16-A Poinciana Avenue  
Address

SAINT AUGUSTINE, FL 32084  
City/State and Zip Code

YSAILJENN@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Moores at (954) 551-7687  
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: INTER22A PROPERTY SOLUTIONS LLC

2. (a) 16-A POINCIANA AVENUE (b) 16-A POINCIANA AVENUE  
 Principal office address of limited liability company: Mailing address of limited liability company:  
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32084

3. 12/19/2012 4. L12000158054  
 Date of filing/registration in Florida Document number

5. (a) Charles Moores  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1504 N216 AVENUE, FORT WASHINGTON, FL 33304  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

\_\_\_\_\_, FL 33304

(b) Charles Moores  
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

16-A POINCIANA AVENUE  
**NEW Registered Office Address:**

SAINT AUGUSTINE, FL 32084

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 TALLAHASSEE, FLORIDA

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] Charles Moores  
 Signature of a member or authorized representative of a member Printed or typed name of signer

*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