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TALLAHASSEE, FLORIDA

AUG 15 2018 S. YOUNG

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations					
(1818 5 1	RUBEN BALMACEDA LLC					
SUBJ	JECT:Nar	ne of Limited	Liability Company	<u> </u>		
Dear :	Sir or Madam:					
The e	nclosed Registered Agent/Registered Off	fice Change a	and fee(s) are submitted fo	or filing.		
Please	e return all correspondence concerning th	nis matter to t	he following:			
Rube	en Balmaceda					
	Name of Person					
RUB	BEN BALMACEDA LLC				- 8	
	Firm/Company			AIA	AUG	
7380) SW 107 Avenue Building 1 Apt.	109		٠٢٠٦٠	<u>.</u>	LED
	Address			72 O.S.	<u>₽</u>	\supset
Mian	ni, FL 33173			AUA .	6: 45	
	City/State and Zip Code					
rbalr	m001@fiu.edu					
	E-mail address: (to be used for future and	nual report no	otification)			
For fu	urther information concerning this matter	. please call:				
Rube	en Balmaceda	305	7263603			
	Name of Person	at (<u>_</u>	Area Code & Daytin	ne 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 3231	4		
	Enclosed is a check for the following		essent o ozolo	od Com		
	☑ \$25 Filing Fee	u	\$55 Filing Fee & Certific	ea 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.

_(b) 12936	SM 49 TRMIAMI EL 33175		
(0)	(b) 12936 SW 49 TRMIAMI, FL 33175		
	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
L130000	003364		
4.	Document number		
i, INC.			
Registered Agent and Registered Office shown on the records of the Florida Dept. of Star 13302 WINDING OAKS COURT			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE A			
	_ IA: 18		
33612	FILE AUG 13 UNI JANES LAHASSEE		
RUBEN BALMACEDA Enter name of NEW Registered Agent and/or NEW Registered Office address: 7380 SW 107 Avenue			
NEW Registered Office Address:			
Building 1 Apt. 109			
33173	_		
the registered offic bility company, it	•		
	Printed or typed name of signee		
ve to act in this ca performance of my I for in Chapter 60 ereby confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accepts. Or, if this document is being fill at the limited liability company has been		
	4. 6, INC. DDRESS) 33612 Office address: s of the State of Fither registered officially company, it it the limited liability company in Ruben Balmare to act in this car		