L13000054331

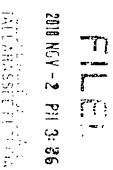
| (Requestor's Name) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
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| (Business Entity Name) | | | | | |
| | | | | | |
| (Document Number) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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NOV 1 y 2018



October 3, 2018

JENNIFER DIAZ PO BOX 2613 HALLANDALE BEACH, FL 33008

SUBJECT: 3308 BEACHWALK, LLC

Ref. Number: L13000054331

We have received your document for 3308 BEACHWALK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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.

Deborah Bruce Corporate Records Supervisor

TAU ABASSES LI

Letter Number: 418A00020616

COVER LETTER

Registration Section :

TO:

INHS18 (2/14)

| Divi | Division of Corporations | | | | | | |
|---|--|---|------------------------------------|--------------|----------|--|--|
| SUBJECT: | 3308 BEACHWALK LLC | | | | | | |
| | Name of Limited Liability Company | | | | | | |
| Dear Sir or N | Madam: | | | | | | |
| The enclosed | d Registered Agent/Registered Off | ice Change and fe | e(s) are submitted for filing. | | | | |
| Please return | all correspondence concerning th | is matter to the fo | llowing: | | | | |
| Jennifer D | iaz | | | | | | |
| | Name of Person | | - | | | | |
| Global Ma | nagement inc | | | | | | |
| | Firm/Company | | - | | 28: | | |
| 112 SW 7TH Terrace | | | | | AOH BIBZ | | |
| | Address | | - | 37.31 (2) | 1-2 | | |
| Hallandale | Beach, FL, 33009 | | | , | PH | | |
| | City/State and Zip Code | | - | | 3: B | | |
| info@myg | lobal.us | | | 1. | • | | |
| E-mail | address: (to be used for future ann | ual report notifica | ation) | | | | |
| For further in | nformation concerning this matter, | please call: | | | | | |
| Jennifer Di | iaz | 786 | 515-5364 | | | | |
| | Name of Person | | Area Code & Daytime Telepho | one Numbe | :r | | |
| Regi: Divis Clift 2661 | EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314 | | | | | |
| Enclosed is a check for the following amount: | | | | | | | |
| ☑ \$2 | 25 Filing Fee | □ \$55 | ☐ \$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

| L N | ame of the limited liability company: $\frac{3}{2}$ | 308 BEACHW | VALK LLC | |
|---|--|---|--|---|
| 2. (a) | 7901 Ludlam Rd. 100 MIAMI, Fi | L 33143 | (b) PROLO | NGACION XOCHALCO #857 COL |
| (-) | Principal office address of limited liabil (Note: MUST BE STREET ADI | | - · / | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| 3. | 12/17/2015 Date of filing/registration in F. | lorida | 4. | Document number |
| 5. (a) | A&R CONSULTANTS, LLC | | | |
| J. (u) | Registered Agent and Registered Office shown 7901 LUDLAM RD SUITE 100 S | | | |
| | MIAMI | FL_3 | 3143 | 28 |
| (b) | GLOBAL MANAGEMENT INC | | | N I |
| | Enter name of NEW Registered Agent and/or I | NEW Registered O | ffice address: | |
| | 112 SW 7TH Terrace | | | |
| | NEW Registered Office Address: | | | · · · · · · · · · · · · · · · · · · · |
| | HALLANDALE BEACH | 3. FL | 3009 | |
| agent was/wa | imited liability company is not organized ange or changes are made, the Florida straight will be identical. Or, in the case of a Florier authorized by an affirmative vote of itself of organization or the operating agr | reet address of th orida limited liabi the members of t | ic registered office ility company, it is the limited liability | and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in |
| | \sim | | CARLOS DO | MINGUEZ BARROSO |
| | ture of a member or authorized representative of a | | | Printed or typed name of signee |
| provisi the obl to merc notified | 1/8001 (C | agent and agree and complete pe ent as provided f ice address, I her | to act in this capa erformance of my d or in Chapter 605, reby confirm that i | icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been |
| Signatu | 62 of Registered Agent | | | |