L170000 36874

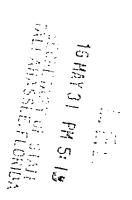
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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05/31/16--01031--011 **25.00



TO:	Registration Section	ER LETTER
	Division of Corporations	
SUBJE		ed Liability Company
	name of Limit	ed Liability Company
Dear Si	r or Madam:	
The enc	closed Registered Agent/Registered Office Change	e and fee(s) are submitted for filing.
Please r	return all correspondence concerning this matter to	o the following:
4	Fernando L. Rivero Name of Person	
	Name of Person	
	Labrit Consulting	
	Firm/Company	
	12924 SW 112 CT	
	Address	
	Miami / FL. 33176	
	City/State and Zip Code	
	F. Rivero @ymail. com	
E-	-mail address: (to be used for future annual report	notification)
For furt	ther information concerning this matter, please cal	1:
Fer	Name of Person at (7)	86 , 395 - 7647
	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

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

uc
24 SW 112 CT MIAM! FC. 33/76
Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
000056834
Document number
- e: -
TO MAY 31 PH
LONDY ST.
-
orida, it is hereby confirmed that after e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in impany. Printed or typed name of signee Printed or typed name of signee