## U170000 58266

(Requestor's Name)		
(Address)		
(Address)		
·		
(City/State/Zip/Phone #)		
(-1,)-1111-1-1,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer		
Special Instructions to Filing Officer:		

Office Use Only



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07/07/15--01019--014 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations	
OBK Project llc	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Roman Cherstvov	
Name of Person	
Penn17 llc	
Firm/Company	
1661 Pennsylvania ave # 6 G	
Address	
Miami Beach, FL 33139	
City/State and Zip Code	
penn1661@gmail.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, plea	se call:
Roman Cherstvov	305 812 0805
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
■ \$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.

Name of the timiled flability company:	Project LLC
1) 1661 Pennsylvania ave # 6 G	(b) 1661 Pennsylvania ave # 6 G
Principal office address of limited liability of (Note: MUST BE STREET ADDRES	· ·
Miami Beach, Fl 33139	Miami Beach, Fl 33139
04.22.2013	L13000058266
Date of filing/registration in Flori	da 4. Document number
(a) Cherstvov, Roman	
Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
1661 Pennsylvania ave # 6 G	
Registered Office Address (MUST BE FLORIL	A STREET ADDRESS)
Miami Beach	, FL 33139
Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	
REGISTERED AGENTS INC	SIATE CORID
NEW Registered Office Address:	754 SATE
3030 N. Rocky Point Drive, STE	150A
Tampa	, FL_ 33607
change or changes are made, the Florida streetent will be identical. Or, in the case of a Florida s/were authorized by an affirmative vote of the articles of organization or the operating agree	Roman Cherstvov
ovisions of all statutes relative to the proper a cobligations of my position as registered agen merely reflect a change in the registered offic	gent and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with and a st as provided for in Chapter 605, F.S. Or, if this document is being e address, I hereby confirm that the limited liability company has be
tified in writing of this change.	Bill Havre - President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent