

L13000066202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

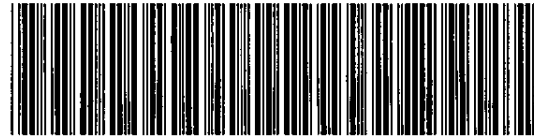
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700253540887

12/16/13--01011--016 \*\*25.00

FILED  
14 JAN 22 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 23 2014

T. BROWN

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Change Address of Global Elite Protection & Security Consulting 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:

**Jose L Cherrez**

Name of Person

**Global Elite Protection & Security Consulting LLC**

Firm/Company

**818 SW 2 Street 101**

Address

**Miami, Florida 33130**

City/State and Zip Code

**jc@globaleliteprotection.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Jose Cherrez**

Name of Person

at ( **910** ) **3205447**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 7, 2014

JOSE L CHERREZ  
10 SW SOUTH RIVER DR APT 611  
MIAMI, FL 33130-1413

2ND ML

SUBJECT: GLOBAL ELITE PROTECTION & SECURITY CONSULTING LLC  
Ref. Number: L13000066202

We have received your document for GLOBAL ELITE PROTECTION & SECURITY CONSULTING 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):

The registered agent must sign the document.

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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 613A00028855

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605 or 605 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: Global Elite Protection & Security Consulting LLC

2. (a) Principal office address of limited liability company: 223 E Flagler Street Suite 504  
Miami, Florida 33131  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 223 E Flagler Street Suite 504  
Miami, FL 33131  
*(Note: MAY BE POST OFFICE BOX)*

05/28/2013

3. Date of filing/registration in Florida

L13000066202

4. Document number

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

Registered Agent: Jose L Cherrez Sr.

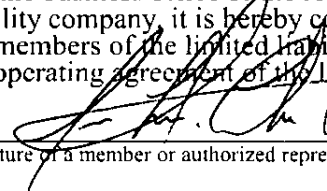
Registered Office Address: 818 sw 2 street 101  
Miami, Florida 33130

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

NEW Registered Agent: Jose L Cherrez

NEW Registered Office Address: 223 E Flagler Street Suite 504  
Miami, FL 33131  
*(MUST BE FLORIDA STREET ADDRESS)*

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 of a member or authorized representative of a member

Jose L Cherrez  
Printed or typed name of signee

*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 of Registered Agent

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

FILED  
14 JAN 22 AM 11:50  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE