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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER -

TO:	Registration Section Division of Corporations					
SHRII	Caraballo Security Solutions	Caraballo Security Solutions LLC				
30131	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ce Change and t	ee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the f	ollowing:			
Antor	nio V Caraballo Jr					
	Name of Person		_			
	Firm/Company		_			
	rimi/Company					
3622	SW 13rd Ter					
_	Address		_			
Mian	ni, FL,33145		_			
	City/State and Zip Code					
antor	nio@caraballogroupmiami.com					
I	i-mail address: (to be used for future ann	ual report notifi	cation)			
For fu	rther information concerning this matter.	please call:				
Anto	nio V Caraballo	786	498-5564			
	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				
	Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	□ \$5	5 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.

I. Na	me of the limited liability company: Caraballo Se	curity Solu	utions LLC		
2. (a)	4767 SW 8th ST	(b) 3	3622 SW 13rd Ler		
(<i>a</i>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(\(\(\)\)_	_	s of limited liability company: "BE POST OFFICE BOX")	
	Miami, FL, 33134		Miami, FL,33145		
	05/13/2013	– – <u>L</u> 1	3000069373		
3.	Date of filing/registration in Florida	4.	Document (number	
5. (a)	Antonio V Caraballo Jr				
7. (u)	Registered Agent and Registered Office shown on the records of	the Florida De	ept, of State:		
	Registered Office Address (MUST BE FLORIDA STREET) 6791 SW 8th ST *	ADDRESS)		ZUIR OCT 15 SECRE FAR TALL AHA	
	Miami	33134		AHASSER	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office addre	<u>w</u> :	PR 4:21 OF STATE SEE, FL	
	NEW Registered Office Address:	<u></u>	<u> </u>		
	4767 SW 8th ST				
	MiamiFI	33134			
the cha agent v was/wa	imited liability company is not organized under the la unge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registe iability com of the limite	red office and the bu pany, it is hereby cor d liability company (siness office of the registered ifirmed that the change(s)	
	4	Antor	nio V Caraballo Jr		
Signa	iture of a member of authorized representative of a member		Printed or ty	ped name of signee	
provisi the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of myposition as registered agent as provide ely reflect a change in the registered office address. It is writing of this change.	ree to act in e performan ed for in Ch hereby conj	this capacity. I furt ce of my duties, and apter 605, F.S. Or, i firm that the limited i	her agree to comply with the I am familiar with and accep f this document is being filea liability company has been	
Signatu	re of Registered Agent				

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