## L13000075003

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## **COVER LETTER**

Division of Corporations
SUBJECT: Setai 3503 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:
Rogerio de Laurenzio Name of Person
Setai 3503 LLC Firm/Company
355 Alhambra arch +1550
Coral Gables, FL 33134 City/State and Zip Code
Afvenice @ gmail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rogerio de Laurenzio at 786 233-8368 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section  MAILING ADDRESS: Registration Section

Enclosed is a check for the following amount:

\$25 Filing Fee

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

☐ \$55 Filing Fee & Certified Copy

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

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.

riorida	_ 1
1. Na	ume of the limited liability company: Setai 3503 LLC
2. (a)	DLA Piper (6) DLA Piper
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
	200 S. Biscayne Blud = 2500 200 S. Biscayne Blud = 2501
	Miami, FL 33131 Miami, FL 33131
2	<u>05/22/2013</u> <u>L13000075003</u>
3.	Date of filing/registration in Florida 4. Document number
5. (a)	NRAT Services, Inc  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	1200 5. Pine Island Rd.
	Plantation ,FL 33324
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	roger 10 de Luci Englo.
	NEW Registered Office Address:  355 Alhambra Circle #1550
	Coral Gables ,FL 33134
If the l	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
agent v	ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization of the operating agreement of the limited liability company.
8	urre of a member Rogerio Ok Lauren 310 Printed or typed name of signee
I here provisi the obl to mero notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect afchange in the fegistered office address, I hereby confirm that the limited liability company has been d in writing of this change.
X	re of Reg/stered Agent