L130000 84063

(Requestor's Name)							
(Address)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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R. WHITE JAN 1 3 2020

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	Djibouti, LLC CT:		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Limited Li	ability Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.
Please r	eturn all correspondence concerning	, this matter to the t	following:
Patrick .	J. O'Connor		
	Name of Person		_
O'Conn	or Hernandez & Associates, P.A.		
	Firm/Company		-
999 Brid	ckell Avenue, Suite 740		
	Address	_	_
Miami,	Florida 33131		
	City/State and Zip Code	e	_
poconno	or@oconnorhernandez.com		
E-	mail address: (to be used for future a	annual report notifi	cation)
For furt	her information concerning this matt	er, please call;	
Patrick .	J. O'Connor	786	628-7541
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the followi	ng amount:	
	■ \$25 Filing Fee	5 Filing Fee & Certified Copy	

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.

1. 1	Same of the limited liability company: Djibouti, LLC					
)	Í	(b)			
ζ.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(···)	Mailing address of I	imited liability company; POST OFFICE BOX)	
	450 Alton Road, Apt, 2507		450 /	Alton Road, Apt. 2507		
	Miami Beach, Florida 33139		Mian	ni Beach, Florida 33139)	
	06/10/2013		L1300	0084063		
3.	Date of filing/registration in Florida	4.	-	Document numb	her	
5. (a)					
	Registered Agent and Registered Office shown on the records of	of the Flori	da Dept. c	of State:		
	Law Center of the Americas, LLC					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				20	
	201 S. Biscayne Blvd Suite 800				. 1610Z	
	Miami	TL_ ³³¹³¹				
(b)					T :	
	Enter name of NEW Registered Agent and/or NEW Registered	<u>ed Office a</u>	iddress:		ဟ္၊ <i>သေ့</i> ယ	
	O'Connor Hernandez & Associates, P.A.				6	
	NEW Registered Office Address:	·				
	999 Brickell Avenue, Suite 740					
	Miami	33131				
	,,	·L				
chang agent was/v	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited last each of the members ticles of organization or the operating agreement of the	ie registe liability c of the line e limited	red offic company mited lia liability	ce and the business of this hereby confirmability company or as	fice of the registered ed that the change(s)	
Signature of a member or authorized representative of a member				Printed or typed name of signee		
provi: the ol to me notifi	eby accept the appointment as registered agent and as sions of all statutes relative to the proper and complet oligations of my position as registered agent as provid rely reflect a change in the registered office address, lead in writing of this change.	gree to ac e perforn led for in I hereby c	et in this nance of Chapte confirm	capacity. I further a f my duties, and I am f 605, F.S. Or, if this that the limited liabil.	igree to comply with the familiar with and accept document is being filed ity company has been	
Signal	ure of Registered Agent					