## 113000094333

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## **COVER LETTER**

	istration Section ision of Corporations				
SUBJECT	LA PLAYA 33133 LLC				
	<u> </u>	f Limited Liabi	lity Company		<b>-</b>
Dear Sir or	Madam:				
The enclose	ed Registered Agent/Registered	l Office Change	and fee(s) are submitte	ed for filing.	
Please retur	m all correspondence concernir	ng this matter to	the following:		
RAUL DE	LGADO SOSA				
<del></del>	Name of Person		<del></del>		
LA PLAYA	33133 LLC				
	Firm/Company		_		
545 WARI	REN LANE			2019 DEC SCORE PARTY FALL ARA	<b>QU</b>
	Address		<del></del>	DEC.	******
KEY BISC	CAYNE			19 888 19	
	City/State and Zip Code		<del></del>	PH I:	₹120mm
rauldelgad	dososa@gmail.com			: 42  S  A  E    DRIDA	. 1922
E-mail ac	ddress: (to be used for future annual repo	rt notification)	_		
For further	information concerning this ma	atter, please cal	l:		
Raul Delg	ado Sosa	786 at (	537-6396		
	Name of Person		Area Code & Daytime Telepho	one Number	_
STR	REET/COURIER ADDRESS:	M	AILING ADDRESS:		
	istration Section	Registration Section			
	sion of Corporations	Division of Corporations			
	ton Building	P.O. Box 6327			
	1 Executive Center Circle ahassee, Florida 32301	Та	llahassee, Florida 32314		
Enc	closed is a check for the follow	ving amount:			
<b>s</b>	25 Filing Fee	□ \$	55 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 608.416 or 608.508, 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. N	Name of the limited liability company: La Playa 3313	3 LLC
2. (	a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	3886 La Playa Bvld Coconut Grove, Miami Florida 33133
(	b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	166 Harbor Drive Apt 5 Key Biscayne Florida 33149
07/	01/2013	L13000094323
3. I	Date of filing/registration in Florida	4. Document number
5.	(a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
	Registered Agent:	Raul Delgado Sosa
	Registered Office Address:	166 Harbor Drive Apt 5 Key Biscayne
		Florida 33149
(	b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW</u> Registered Agent:	0.19 A.S.S.
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	545 Warren LN Key Blscayne
and liab the the	the limited liability company is not organized under the later that after the change or changes are made, the Fluid the business office of the registered agent will be identified company, it is hereby confirmed that the change(s) members of the limited liability company or as otherwise operating agreement of the limited liability company.	orida street address of the registered office
Rai	ul Delgado Sosa	_
	ed or typed name of signee	_
I he com and Cha add	ereby accept the appointment as registered agent and as ply with the provisions of all statutes relative to the provisions and accept the obligations of my pospile 608, F.S. Or, if this document is being filed to mei ress, it hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent