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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1941 SW 2 Street, 22 C 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:	
Carlos F. Miranda Name of Person	
Fausto Carital, LLC Firm/Company	
1180 N.W. 8 St. Address	<u> </u>
Miam. /F/ /33136 City/State and Zip Code	E 23
E-mail address: (to be used for future annual report notification)	M 9: 05
For further information concerning this matter, please call:	
Carlos F. Miranda at (305) 961-1179 Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee Florida 32314	

Enclosed is a check for the following amount:

☎ \$25 Filing Fee

Tallahassee, Florida 32301

□ \$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 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. Name of the limited liability company: 1941	SIN 2 Street LLC
2. (a) 180 NW 3 St. Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	(b) 1180 NW 8 St.
Migmi, Fl 33136	Migmi, F1 33136
June 10, 2014	L 130000 95557
 Date of filing/registration in Florida (a) Alco Hayalambides Registered Agent and Registered Office shown on the rec 	4. Document number ords of the Florida Dept. of State:
Registered Office Address MUST BE FLORIDA ST	REET ADDRESS)
lui ami	FL 33129
(b) Carlos Miranda	
Enter name of NEW Registered Agent and/or NEW Reg	+
NEW Registered Office Address:	9:05
Mi ami	,FL 33 36
the change or changes are made, the Florida street add agent will be identical. Or, in the case of a Florida lim	the laws of the State of Florida, it is hereby confirmed that after ress of the registered office and the business office of the registered little liability company, it is hereby confirmed that the change(s) inhers of the limited liability company or as otherwise provided in of the limited liability company. Carlos F. Miranda
Standard of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and cothe obligations of my position as registered agent as p to merely reflect a change in the registered office additionally in writing of this change.	and agree to act in this capacity. I further agree to comply with the mplete performance of my duties, and I am familiar with and accept rovided for in Chapter 605, F.S. Or, if this document is being filed ress, I hereby confirm that the limited liability company has been
Signature of Registered Agent	