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COVER LETTER

, T	O: Registration Section Division of Corporations		
SUBJECT: EBIDATA 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:			
Jorge R. Gutierrez Name of Person Gutierrez Yelin & Boulris, PLLC Firm/Company			
100 Almeria Avenue, Suite 340			
Coral Gables, FL 33134			
City/State and Zip Code			
jorge.gutierrez@gybmpl.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
·	Jorge R. Gutierrez	305 <u>358-5100</u>	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:			
	□ \$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. Name of the limited liability company: EBIDATA LLC 2. (a) Principal office address of limited liability company: 100 Almeria Avenue (Note: MUST BE STREET ADDRESS) Suite 202 Coral Gables, FL 33134 (b) Mailing address of limited liability company: 100 Almeria Avenue (Note: MAY BE POST OFFICE BOX) Suite 202 Coral Gables, FL 33134 7/5/2013 L13000095900 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Agent: EBNER, URS Registered Office Address: 100 Almeria Avenue Suite 202 Coral Gables, FL 33134 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: Jorge R. Gutierrez **NEW** Registered Office Address: 100 Almeria Avenue (MUST BE FLORIDA STREET ADDRESS) Suite 340 Coral Gables FL 33134 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the bysiness office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statules relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the timiled liability company has been notified in writing of this change. gistered Agent Division of Corpolations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**

INHS18 (05/08)