

L13000110659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

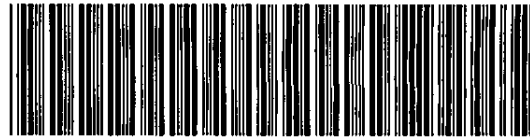
(Business Entity Name)

(Document Number)

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OCT 30 2014  
T. CARTER

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 OCT 29 AM 11:26

LLC RA/RD Change

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

SUBJECT: 344 NW 41 ST MIAMI 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:

Jeremy M. Dale  
Name of Person

Name of Person

Firm/Company

350 South Miami Ave., #1203

Address

Miami, FL 33130

City/State and Zip Code

JMAXDALE@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeremy M. Dale at (305) 282-5674  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- ☐
- \$25 Filing Fee
- ☐
- \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 7, 2014

JEREMY MAXWELL DALE  
350 SOUTH MIAMI AVENUE  
APARTMENT 1203  
MIAMI, FL 33130 US

SUBJECT: 344 NW 41 ST MIAMI LLC  
Ref. Number: L13000110659

We have received your document for 344 NW 41 ST MIAMI LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter  
Regulatory Specialist

Letter Number: 214A00021423

**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: 344 NW 41 ST MIAMI LLC

2. (a) 1985 Bay Drive, Apt. 16 (b) \_\_\_\_\_

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Miami Beach, FL 33141

08/05/2013

L13000110659

3. Date of filing/registration in Florida

4. Document number

5. (a) Business Filings Incorporated  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

515 E. Park Avenue

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tallahassee, FL 32301

(b) Jeremy Dale

Enter name of NEW Registered Agent and/or NEW Registered Office address:

350 S. Miami Ave., Apt. 1203

NEW Registered Office Address:

Miami, FL 33130

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 business 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.

Jeremy Dale  
Signature of a member or authorized representative of a member

Jeremy Dale, Manager  
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 statutes 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jeremy Dale  
Signature of Registered Agent

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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