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COVER LETTER

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TO: Registration Section Division of Corporations							
SUBJECT: 620 SW RENTAL LLC							
Name of	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 t	matter to the following:						
ANA KOFF							
Name of Person							
620 SW RENTAL LLC							
Firm/Company							
6619 SOUTH DIXIE HIGHWAY, # 406							
Address							
MIAMI, FL 33143							
City/State and Zip Code							
620SWRENTAL@GMAIL.COM							
E-mail address: (to be used for future annua	l report notification)						
For further information concerning this matter, pl	ease call:						
ANA KOFF	305 5465630						
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						
INHS18 (2/14)							

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.

l. Na	ame of the limited liability company: 620 SW REN	HALI	_L(,		
2. (a)	6619 SOUTH DIXIE HIGHWAY, # 406		(b)	P.O. B0	OX 566269	
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	y:
	MIAMI, FL 33143	_		MIAMI,	FL 33256-6269	
	08/07/2013	_	L	.130001	11640	
3.	Date of filing/registration in Florida	4.	_		Document number	
5. (a)	ANA KOFF					
	Registered Agent and Registered Office shown on the records of 8365 SW 104TH STREET Registered Office Address (MUST BE FLORIDA STREET)			Dept. of Stat	e: -	
	MIAMI, FI	3315	6		-	
(b)						Ü
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office :	addı	ess:	2015	SE
	6619 SOUTH DIXIE HIGHWAY, # 406				2015 MAR 20	CRETAF
	NEW Registered Office Address:				0 78	CORFO
	MIAMI , FI	3314	3		යා ව	TATE
the cha agent v was/we the arti	imited liability company is not organized under the launge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited libra authorized by an affirmative vote of the members of organization or the operating agreement of the ture of a member or authorized representative of a member	f the repability of the limited	gist cor imit d lia	ered offic npany, it i ed liabilit	e and the business office of the regi s hereby confirmed that the change y company or as otherwise provide	stered (s)
	•	ree to c	ict i	n this can		th the
provisi the obl to mere notified	by accept the appointment as registered agent and agent of all statutes relative to the proper and complete igntions of my position as registered agent as provide ely reflect a change in the registered office address, I in writing at this change. The of Registered Agent	nertor	ma	nce of mu	duties, and I am familiar with and i	accent

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