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4. SERVICES FEB 2 6 2014



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2014

ROCKERBOX VINTAGE MOTORBIKES LLC 1610 LENNOX AVE APT 217 MIAMI BEACH, FL 33139 US

SUBJECT: ROCKERBOX VINTAGE MOTORBIKES LLC Ref.-Number: L13000145363

Our records indicate the registered agent for the above named limited liability company resigned on November 22, 2013 and that the limited liability company currently does not have a registered agent designated.

Chapter 608, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6051.

Gary Blankenbaker Document Specialist Division of Corporations

Letter Number: 014A00000359

## 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.

BOX VINTAGE MOTORBINES LU
1610 LENOX AVE APT 217 MATH BEACH, FL, 33139
1610 LENOX AUG APT 217 MARI BEACH, FL, 33139
<u>L13000145363</u> 4. Document number
the records of the Florida Dept. of State:
MATTHEW CHIRINO
501 76TH ST APT 5
W Registered Office address:
AUGUANDRO MARLÍA LOREZ
1610 LENOX AVE, APT 21
,FL_33139
aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
pni)
gree to act in this capacity. I further agree to oper 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.

**FILING FEE: \$25.00**