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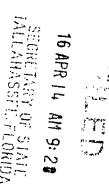
(Requestor's Name)								
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COVER LETTER

TO:	Registration Section Division of Corporations								
SUBJI	LA MOLIENDA, LLC								
Name of Limited Liability Company									
Dear S	ir or Madam:								
The en	closed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.							
Please	return all correspondence concerning this	s matter to the following:							
EMM	ANUEL SANCHEZ								
	Name of Person								
LA M	OLIENDA, LLC								
	Firm/Company								
1101	BRICKELL AVE., 8TH FLOOR SC	OUTH TOWER							
	Address								
MIAN	11, FL 33131								
•	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·							
esand	chez@lamolienda.net								
E	-mail address: (to be used for future annu	ual report notification)							
For fur	ther information concerning this matter,	please call:							
EMM	ANUEL SANCHEZ	305 7939544							
•	Name of Person	Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations		MAILING ADDRESS: Registration Section 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							
INHS18	8 (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

1. N	ame of the limited liability company: LA MOLIE	NDA, LL	C —					
2. (a)	1101 BRICKELL AVENUE		(b) 1101 BRICKELL AVENUE					
 (w)	Principal office address of limited liability company:	`	(-)		Mailing address of		-	-
	(Note: MUST BE STREET ADDRESS)			0711516	(<u>Note: MAY BI</u>			<u>BUX</u>)
	8TH FLOOR, SOUTH TOWER			81H FLC	DOR, SOUT	H IOWI	=K	
	MIAMI, FL 33131			MIAMI, F	FL 33131		<u>-</u>	
	11/27/2013		i	_1300016	66241			
3.	Date of filing/registration in Florida	4.	_		Document nur	nber		
5. (a)								
J. (a)	Registered Agent and Registered Office shown on the records	of the Flori	da	Dept. of State	- -			
	JORDI R. TORRENTS							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_				
	2655 LE JEUNE ROAD SUITE 804				25	_		
	CORAL GABLES	FL_3313	4			6 APR		
					•	ASS.	11	ए ≛ अर ७ व
(b)					_	25.7 25.7		**************************************
	Enter name of NEW Registered Agent and/or NEW Registe	red Office s	dd	ress:		المارية المارية	A M	Comment A y E
	EMMANUEL SANCHEZ				_	080	9:28	San P
	NEW Registered Office Address:				·	≥,		
	1101 BRICKELL AVE, 8TH FLOOR SOUTH TOWER				-			
	MIAMI	_{FL} 3313	1					
the ch agent was/w the an	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of the street and the operating agreement of the operating agreement of the street or the operating agreement of the operations.	laws of the rep I liability is of the lithe limited	ne gis co mi	tered office mpany, it is ted liability ability con	e and the busins hereby confir y company or a npany. SANCHEZ	ess office med that as otherw	e of the the ch ise pro	e registered nange(s)
_	ature of a member or authorized representative of a member			•	Printed or typed			
provis the ob to men notifie	eby accept the appointment as registered agent and a cions of all statutes relative to the proper and comple- ligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change.	agree to a ete perfor ided for in , I hereby	nct ma i C co	in this cape ince of my hapter 603 infirm that	acity. I further duties, and I a 5, F.S. Or, if th the limited lial	r agree to m familia iis docum bility com	comp r with ent is pany	oly with the and accept being filed has been
51gnat	ure of Registered Agent							