L14000028861

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

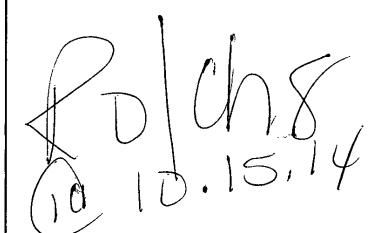




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14 OCT -6 Fill2: 34



COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: PREGONERO	LLC :			
Na	ame of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
FANNY SUAREZ Name of Person				
Name of Person	·			
•				
Firm/Company				
15673 sw 52Ct				
Address				
Miramar FL 33027				
City/State and Zip Code				
losrincon 1@ hotmail.co				
E-mail address: (to be used for future as	nnual report notification)			
For further information concerning this matter	or, please call:			
German Rincón M Name of Person	at (954) 5897461 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.

1. Na	me of the limited liability company:PREG	ONER(o uc		•
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		15673	Sw 52 ct Mig failing address of limited (Note: MAY BE POST)	liability company:
3. 5. (a)	Date of filing/registration in Florida Suggestation of Florida	 - 4.		1000028861 Document number	
J. (a)	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) [5653 Sw 52 C]			:	
(b)	Miramar , FL	. 330	07		14 001-6
	Enter name of NEW Registered Agent and/or NEW Registered Suggestered Fanny M NEW Registered Office Address: 15673 Sw 52 0+	Office add	ress:		PH 12: 24
	Miramar, FL	<i>3</i> 30	97		
the cha agent v was/we	mited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of organization or the operating agreement of the	the regist ability con of the limi	tered office mpany, it is ted liability ability com	and the business offi hereby confirmed the company or as other pany.	ce of the registered at the change(s)
I herel provisi the obli to mere notified	MULIFICATION OF A MEMBER OF A MEMBER OF A MEMBER OF A MEMBER OF AUTHORIZED REPOSENTATIVE OF A MEMBER OF AUTHORIZED REPOSENTATION OF AUTHORIZED REPOSENTATION OF AUTHORIZED REPOSENTATION OF THIS CHANGE OF THE PROPERTY OF THE	ree to act performa d for in C hereby co	in this cana	rinted or typed name of acity. I further agree luties, and I am famil F.S. Or, if this document the limited liability co	to comply with the

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