L14 000 036491

(Requestor's Name)								
(Address)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
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. COVER LETTER

то:	Registration Section Division of Corporations		·			
SUBJI	GUARAPITO LLC E CT :					
., 0		Name of Limited Liability Company				
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.			
Please	return all correspondence concernin	g this matter to the	e following:			
	Name of Person					
SYED	MANRARA & ASSOCIATES, LLC					
	Firm/Company					
300 SE	IVILLA AVE. SUITE 205					
	Address					
CORA	L GABLES, FL 33134					
	City/State and Zip Coo	ile				
TSYE	O@ZUBEROSYED.COM					
13	-mail address: (to be used for future	annual report noti	fication)			
For fur	ther information concerning this ma	tter, please call:				
TALH.	A G. SYED	305 at (615-1458			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the follow	ing amount:				
	■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHST	3 (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.

(a)	147 ALHAMBRA CIRCLE, SUITE 214		(b)	SMA LLC 300 SEVILLA AVE, STE 205	
` .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	03/04/2014		L1400	00036491	
	Date of filing/registration in Florida	4.		Document number	
(a)	BLANCO & COMPANY, PA				
(b)	Registered Agent and Registered Office shown on the record	s of the Flor	da Dept. d	of State:	
	8360 WEST FLAGER ST, SUITE 200				
	Registered Office Address (MUST BE FLORIDA STRE	<u>ET ADDRE</u>	<u>SS)</u>		
	MIAMI	. FL 33144			
	SYED MANRARA & ASSOCIATES, LLC			2021	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Office	id <u>dress</u> :		
	300 SEVILLA AVE, STE 205			6	
	NEW Registered Office Address:	_	_	-8 pH 2:0	
	CORAL GABLES	FL_33134			
inge ent v s/wc	imited liability company is not organized under the or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membe cless of organization or the operating agreement of	the registe I liability (rs of the li the limited	red officements of the company mitted list	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.	
Signature of a member or authorized oppresentance of a member			Printed or typed name of signee		
wisi obl. merc	by accept the appointment as registered agent and ons of all statutes relative to the proper and compligations of my position as registered agent as proyely reflect a change in the registered office address in the registered office address in the registered of the change of this change.	ele perfori	nance o	f my duties, and I am familiar with and acce	

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