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LLC REGISTERED AGENT CHANGE

TLEGAL DOCUMENTS PREPARATION & SOLUTIONS LLC

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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.

Principal office address of limited liability company:	_ (b)	Mailing address of limited liability company:	
(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)	
811 SUNSET DRIVE	PO	BOX 558604 MIAMI, FL 33255	
CORAL GABLES, FL 33146	<u> </u>		
03/04/2014	L140	00036568	
Date of filing/registration in Florida	4.	Document number	
Registered Agent and Registered Office shown on the records of (he Florida Dept. u	f State:	
A & G BUSINESS SERVICES INC			
Registered Office Address (MUST BE FLORIDA STREET A	(DORESS)		
5805 BLUE LAGOON DR STE 200		— Iv	
MIAMI , FL	33126	F.	<u>:</u>
	20,211		i a
			-
Finter name of NEW Registered Agent and/or NEW Registered	Office eddress:		λ ¬
BERNARDO MOTOLA	. —		ά 2
NEW Registered Office Address:		92	
811 SUNSET DRIVE		Dr A	71
CORAL GABLES , FL	33146		
mited liability company is not organized under the law- nge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia	the registered of bility company	office and the business office of the registed it is hereby confirmed that the change(s)	red
re authorized by an affirmative vote of the members of cles of organisation or the operating agreement of the	f the limited lia limited liability	bility company or as otherwise provided n company.	1
		DO MOTOLA	
ne of a meninger or authorized representative of a member		Printed or typed name of Signes	
y accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I h in writing of this change.	ee 10 aut in this performance of I far in Chapter tereby confirm t	capacity. I further agree to comply with t my duties, and I am familiar with and acc 603, F.S. Or, if this document is being fli that the limited liability company has been	hu epi ed

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