

L14 0000061175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

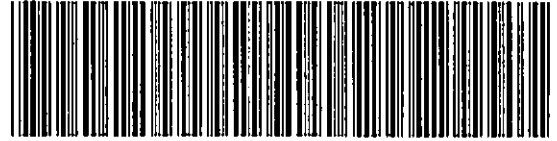
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800381016578

02/14/22--01033--002 25.00

SECRETARY OF STATE
TALL MANUSSET, MA

2022 FEB 14 AM 7:45

FILED

O SIMMONS

FEB 24 2022

COVER LETTER

TO: Registration Section
Division of Corporations
Cedrus Investment LLC

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rui Tabakov Reboucas

Name of Person

Seletto Value LLC

Firm/Company

1395 Brickell Avenue, Suite 900

Address

Miami, FL 33131

City/State and Zip Code

info@selettovalue.com / rui.tabakov@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rui Tabakov Reboucas 305 200-8735

_____ at (_____) _____

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 following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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.

Cedrus Investment LLC

1. Name of the limited liability company: _____
 12386 STATE RD535 #133 _____ 12386 STATE RD535 #133 _____

2. (a) _____ (b) _____
 Principal office address of limited liability company: _____ Mailing address of limited liability company: _____
 (*Note: MUST BE STREET ADDRESS*) (*Note: MAY BE POST OFFICE BOX*)
 Orlando, FL 32836 _____ Orlando, FL 32836 _____

3. _____ 4. _____
 Date of filing/registration in Florida Document number
 CIO Management LLC _____

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
 150 SE 2ND Avenue, Suite 1408

Registered Office Address (*MUST BE FLORIDA STREET ADDRESS*)

 Miami _____ 33131
 _____, FL _____

(b) Rui Tabakov Reboucas
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
 1395 Brickell Avenue, Suite 900
NEW Registered Office Address:

 Miami _____ 33131
 _____, FL _____

FILED
 2022 FEB 14 AM 7:45
 SECRETARY OF STATE
 TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Signature of a member or authorized representative of a member Eduardo Tassinari Alves

 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

 Signature of Registered Agent