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Office Use Only



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SECRETARY OF STAIL
MASSEEL FLORIDA



## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Very Lucky Space LLC

Name of Corporation

DOCUMENT NUMBER: L14000062004

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**KEVIN FISCHER** 

Name of Contact Person

OSCAR REY CPA

Firm/Company

1400 LINCOLN RD. #504

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

KEVIN@OSCARREY.COM

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

For further information concerning this matter, please call:

**KEVIN FISCHER** 

305

531-8518

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA	
	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: VERY LUCKY SPACE, LLC	
	office address: 1400 LINCOLN RD, UNIT 504  EACH, FL 33139	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 04/16/2014 Document number: L14000062004	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	ALLEGIANT TITLE LLC	
	100 N BISCAYNE BLVD, 2106	
	MIAMI, FL 33132	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	OSCAR REY CPA	
	OSCAR REY CPA  1400 LINCOLN RD., #504	
	P.O. Box NOT acceptable	
	MIAMI BEACH, FL 33139	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.		
taper	Fabio Valencio Scia rene Ha / nemeros printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	anature of Registered Agent Date	
Decar	Phalf of an entity:  Pay CPA  Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*