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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2018

MARCO BROCCOLO 11230 SW 72 AVE MIAMI, FL 33156 US

SUBJECT: LIS UNDERWRITERS, LLC Ref. Number: L14000069711

We have received your document for LIS UNDERWRITERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 318A00013658

COVER LETTER

TO: Registration Section Division of Corporations

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

MARG BROCCOLO	_			
Name of Person	107	5 	7 9	
LIS UNDERWRITERS LLC			ช ก () ()	
Firm/Company	0 T C 2	š	7,7	
11230 SW 72 AVE		DH 12:		
Address	Ť ř	•• :	5	
MIAMI FL 33156		ు ' య	-	Ð
City/State and Zip Code				
Marcobroccolo Gme, com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MARCO BADCCOLD #1(305, 4915565				

Name of Person

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

S55 Filing Fee & Certified Copy

INH\$18 (2/14) \$25 CHECK # 132 SENT ON JUN 2117 2018 (REF Your LETTER 313 Acoco 13655)

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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.

(<u>Nore:</u>	$\frac{1}{27} \frac{2}{2514}$ e address of limited liability comparative	•		(<u>Note</u> TLATL	address of limits MAY BE POS	ed liab S <u>T OF</u>	ility compa FICE BOX	ע	-
APIL L 3. Date of fi	27 2-514 ling/registration in Florida								
			4, -	L 14 OC	> 00 64 nent number				-
Registered Agent and	Registered Office shown on the rec ROS RERITY FARM	ords of the NS Pi	r Florida I AD	Dept. of State:					
PALM BE	ACH GARDENS	, FL_	334	10		. <u>4</u> 7	Þ	18	
Enter name of <u>NEW I</u>	Bilo (COW Registered Agent and or <u>NEW Reg</u>	ristered O	ffice add	<u></u>			n- n	JUL 20	
<u>NEW</u> Registered Oth	SW 72 AVE ce Address:						н - П - Г - Г - Г	1 6 m	
MIAI	11	, FL_	331	56				\sim	

It the limited hability 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.

1 í MARCO BACCOLO Signature of a member or authorized representative of a member 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.

 $\Lambda \sim$ Signature of Registered Agent Ŋ Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 **FILING FEE: \$25.00** INHS18 (2/14)