

L14 0000 703 74

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

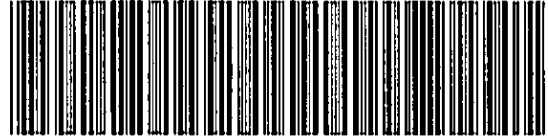
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Big Ben 1000 LLC
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:

ZIVAN HABIBI

Name of Person

Big Ben 1000 LLC

Firm/Company

940 Lincoln Rd #307

Address

Miami Beach, FL, 33139

City/State and Zip Code

myaccountant@tandaooffice.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maya Razla

Name of Person

at (954) 983-9394

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.

1. Name of the limited liability company: BIG BEN 1000 LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

940 Lincoln Road #307
Miami Beach, FL, 33139

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

940 Lincoln Rd #307
Miami Beach, FL, 33139

3. 05/01/2014 Date of filing/registration in Florida 4. L14000070374 Document number

5. (a) ZIVAN HABIBI
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1000 WEST AVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

APT #1420

MIAMI BEACH, FL 33139

(b) ZIVAN HABIBI
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

940 Lincoln Rd #307

NEW Registered Office Address:

MIAMI BEACH

FL 33139

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JUL 10 - 5 PM 2:25
TALLAHASSEE, FL
CLERK OF STATE

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.

Zivan Habibi

Signature of a member or authorized representative of a member

ZIVAN HABIBI

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.

Zivan Habibi

Signature of Registered Agent