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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Empower H.I.S. LLC

Name of Limited Liability Company

Dear Sir or Madam:

١

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

Please return all correspondence concerning this matter to the following:

PEREZ JORGE E, SENIOR

Name of Person

EMPOWER H.I.S LLC

Firm/Company

8770 SW 72ND STREET # 459

Address

MIAMI, FLORIDA 33173

City/State and Zip Code

RJPEREZ@EMPOWERHIS.COM

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

For further information concerning this matter, please call:

RICARDO PEREZ

् 342-9024

305

at (

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

□ \$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.

i. Na	ame of the limited liability company:	H.1.S. L	LC		
2. (a)	EMPOWER H.I.S. LLC	(1		VER H.I.S. LLC	
2. (u)	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)	(.	·	Mailing address of limited (Note: MAY BE POST	· · ·
	8770 SW 72ND STREET # 459		8770 SV	V 72ND STREET	# 459
	MIAMI, FLORIDA 33173		MIAMI, F	FLL 33173	
	JUNE 26TH 2014		L1400010	02564	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	PEREZ JORGE SR				
. ()	Registered Agent and Registered Office shown on the records o PEREZ JORGE E SR	f the Florid	a Dept. of State	- e:	
	Registered Office Address (MUST BE FLORIDA STREET 8770 SW 72ND STREET # 459	ADDRES.	5)	-	
	MIAMI, FL, F	<mark>233173 ل</mark>		-	
(b)	JORGE A PEREZ				
(-)	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	ldress:		
	JORGE A PEREZ			RY OF	יי, רררו
	NEW Registered Office Address:			COF STATE	0
	8724 SW 72ND STREET # 459				•
	<u>MIAMI, F</u>	L_33173	1	· · ·	
the cha agent v was/we the arti Signa I here provis the obt to mer- notifie	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member be accept the appointment as registered agent and as loss of all statutes relative to the proper and complet ligations of my position as registered agent as provia ely reflect a change in the registered office datress, d in writing of this change.	f the regi iability c of the lin e limited JO pree to acc e perform ed for in hereby c	stered office ompany, it is nited liability liability con RGE A PE that in this cap bance of my Chapter 605 confirm that	e and the business off s hereby confirmed tl y company or as othe npany. EREZ Printed or typed name o acity. I further agree duties, and I am fami 5, F.S. Or, if this doc the limited liability c	fice of the registered that the change(s) rwise provided in
/	Division of Corporations• P.O. FILING			5500, FL 34314	

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