

L14000109483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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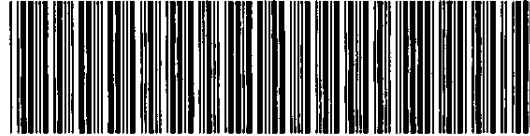
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 14 AM 11:34

JUL 15 2015

T CANNON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2015

DARYL AUGUSTE
GREEN ARROW CAPITAL
13020 SW 92ND AVE., SPT 111
MIAMI, FL 33176 US

SUBJECT: GREEN ARROW CAPITAL LLC
Ref. Number: L14000109483

We have received your document for GREEN ARROW CAPITAL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Tina D Cannon
Regulatory Specialist II

Letter Number: 015A00010525

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FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Green Arrow Capital 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:

Daryl Auguste

Name of Person

Firm/Company

13020 SW 92nd AVE #111

Address

Miami, FL 33176

City/State and Zip Code

darylauguste@me.com

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

For further information concerning this matter, please call:

Daryl Auguste

786

575-5795

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.

Green Arrow Capital LLC

1. Name of the limited liability company: Green Arrow Capital LLC
13020 SW 92nd AVE #A207 Miami, FL 33176

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

10 July 2014

L14000109483

3. Date of filing/registration in Florida 4. Document number

Daryl Auguste

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
13020 SW 92nd AVE #A207

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Miami, FL 33176

Daryl Auguste

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

13020 SW 92nd AVE #A111

NEW Registered Office Address:

Miami, FL 33176

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 14 AM 11:34

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.

Derek Auguste

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.

Signature of Registered Agent