

L14 000 112313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

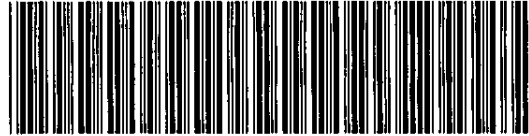
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800274274028

06/30/15--01027--007 **25.00

FILED
15 JUN 30 AM 7:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 01 2015

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LELE PONS 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:

Eduardo C. Serrano

Name of Person

The Serrano Law Firm, P.A.

Firm/Company

777 Brickell Avenue, Suite 500

Address

Miami, Florida 33131

City/State and Zip Code

serrano@serrano-law.com

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

For further information concerning this matter, please call:

Eduardo Serrano

Name of Person

at (305)

240-6740

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.

1. Name of the limited liability company: LELE PONS LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

4520 North Bay Road

4520 North Bay Road

Miami Beach, FL 33140

Miami Beach, Florida 33140

07/16/2014

L14000112313

3. Date of filing/registration in Florida

4. Document number

5. (a) The Serrano Law Firm, P.A.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

782 NW 42 Avenue, Suite 343

Miami, FL 33126

(b) The Serrano Law Firm, P.A.

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

NEW Registered Office Address:

777 Brickell Avenue, Suite 500

Miami, FL 33131

FILED
15 JUN 30 AM 7:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of a member or authorized representative of a member

Eduardo C. Serrano, A.R.

Printed or typed name of signer

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]
Signature of Registered Agent