

L1400011742F

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

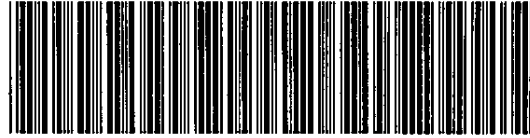
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

K. SALY
OCT 27 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2016

SPANISTA LLC
VIRGINIA L SHIVERDECKER
701 SOUTH HOWARD, STE. 106-110
TAMPA, FL 33606

SUBJECT: SPANISTA LLC
Ref. Number: L14000117428

RECEIVED
2016 OCT 21 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SPANISTA 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):

You failed to make the correction(s) requested in our previous letter.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 216A00016513

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPANISTA, 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:

VIRGINIA L. SHIVERDECKER
Name of Person

SPANISTA, LLC.
Firm/Company

2195 NW DIAMOND CREEK WAY
Address

JENSEN BEACH, FL. 34957
City/State and Zip Code

ginny.shiverdecker@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VIRGINIA L. SHIVERDECKER at (816) 588-9008
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

Paid Previously

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: SPANISTA, 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)

2195 NW DIAMOND CREEK WAY
JENSEN BEACH, FL. 34957

2195 NW DIAMOND CREEK WAY
JENSEN BEACH, FL. 34957

3. JULY 25, 2014
 Date of filing/registration in Florida

4. L14000117428
 Document number

5. (a) CORPORATION SERVICE COMPANY
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1201 HAYS STREET
TALLAHASSEE, FL. 32301

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 TALLAHASSEE, FLORIDA

(b) VIRGINIA L. SHIVERDECKER
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

2195 NW DIAMOND CREEK WAY
NEW Registered Office Address:
JENSEN BEACH, FL. 34957

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.

Virginia L. Shiverdecker
 Signature of a member or authorized representative of a member

VIRGINIA L. SHIVERDECKER
 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.

Virginia L. Shiverdecker
 Signature of Registered Agent