## L14000125823

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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SECKETARY OF STATE
ALLAHASSEE, FLORIDA

K.SALY EXAMINER SEP 13

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Latitude Ventures  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:
Keith Smith Name of Person
Latitude Ventures Firm/Company
102 NE 2nd Street #508 Address
BOCA Raton, FL 33432 City/State and Zip Code
Keith @ Venturefiji. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keith Smith at (800) 839. 7891  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 \$\sum \\$55 Filing Fee & Certified Copy INHS18 (2/14)

## 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.

Florid	
1. Na	ame of the limited liability company: Latitude Ventures
2. (a)	(b)
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	674 NW Library commons Way 102 NE 2nd Street #508
	Boca Raton, FL 33432 Boca Raton, FL 33432
	8/11/2014 1-14000125823
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Keith H. Smith
3. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Keith H. Smith
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Registered Office Address MUST BE FLORIDA STREET ADDRESS)  3419 S Ocean Blvd.  Highland Beach, FL 33487
	Highland Beach, FL 33487
	The state of the s
(b)	· · · · · · · · · · · · · · · · · · ·
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Keith H. Smith address:
	NEW Registered Office Address:
	102 NF 2nd Stroot #508 commons was
ing	· Boca Raton, th
<b>&gt;</b> ∪	Boca Raton, FL 33432 33432
If the l	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the cha	ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/w	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the art	icles of organization or the operating agreement of the limited liability company.
Signa	TEITH H. Swith  Printed or typed name of signee
_	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
the obt	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this change.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00