## 14000137319

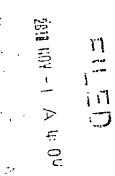
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

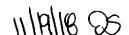
Office Use Only



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11/01/18--01018--003 \*\*25.00





## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	ENVI PROPERTIES, LLC				
2,20,		ne of Limited Liability Company			
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning th	nis matter to the following:			
Aleja	indro Espino				
	Name of Person	F.			
Taylor Espino Vega & Touron, P.A.					
	Firm/Company				
201	Alhambra Circle, Suite 801	· 			
	Address				
Cora	l Gables, Florida 33134	Z*			
	City/State and Zip Code				
aesp	ino@tevtlaw.com				
1	E-mail address: (to be used for future and	nual report notification)			
For fu	rther information concerning this matter	, please call:			
Aleja	ndro Espino	305 443-2043			
	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			

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.

1. N	lame of the limited liability company: ENVI PROF	PERTIES	S, LLC		
2. (a)			D)		
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	12230 SW 100TH STREET		12230 SW 100TH STREET		
	MIAMI, FL 33186		MIAMI, FL 33186		
	09/03/2014		L14000137319		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	、Alejandro Espino				
J. (a	Registered Agent and Registered Office shown on the records of	of the Florida	a Dept. of State:		
	c/o Taylor Espino Vega & Touron, P.A.		73		
c/o Taylor Espino Vega & Touron, P.A.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  55 Merrick Way, Suite 406					
	55 Merrick Way, Suite 406				
	Coral Gables	33134			
(b)	Alejandro Esnino				
,	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	ldress:		
	c/o Taylor Espino Vega & Touron, P.A.				
	NEW Registered Office Address:				
	201 Alhambra Circle, Suite 801	<del> </del>			
	Coral Gables	<sub>L</sub> 33134			
the chagent was/v	limited liability company is not organized under the I	laws of the of the regi- liability co s of the lim	State of Florida, it is hereby confirmed that after stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in		
	Jan	En	rique I. Espino		
	attro of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple digations of my position as registered agent as provid reference in the registered office address, it is realize of this change.	gree to act le perform ded for in C I hereby c	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been		
Signat	ure of Registered Agent				
		D (32)	7. T. II. I		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: S25.00					

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