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COVER LETTER

TO: Registration Section Division of Corporations	. *	
SUBJECT: 1662, LLC		
	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Edward McGovern		
Name of Person		
1662. LLC		
Firm/Company		
1521 SW 153rd Path		
Address		
Miami, FL 33194		
City/State and Zip Code		
ofcmcgovern@hotmail.com		
E-mail address: (to be used for future annual rep	oort notification)	
For further information concerning this matter, please	call:	
Edward McGovern	954 665-4565	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	
Enclosed is a check for the following amou	nt:	
■ \$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.

. Na	ame of the limited liability company:			
. (a)	1662, LLC	(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)
	1521 SW 153rd Path			
	Miami, FL 33194			
	09/03/2014	1	.14000137	1474
	Date of filing/registration in Florida	4.		Document number
(a)				
(a)	Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENTS, INC.	the Florida	Dept. of Sta	ite:
	Registered Office Address (MUST BE FLORIDA STREET) 13302 WINDING OAK COURT A	<u>ADDRESS</u>	!	_
	Tampa . FI	33612		202 (\$AL
				F 2020 JAN SECRE IN SALL AND
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office add	lress:	FILED JAN-2 PH 6: 10 MERSSES HEDPID
			-	골 및 <u> </u>
	Edward McGovern			_ <u> </u>
	NEW Registered Office Address:			
	1521 SW 153rd Path			-
	Miami . FI	33194		
hange gent v as/w ie art	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liacre authorized by an appropriative vote of the members of icles of organization or the operating agreement of the number of a member or authorized representative of a member	ws of the registere ability cor of the limited li	d office ar npany, it ted liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
-		wales \$40*	in chia acce	
rovis. 1e ob 1 mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is a first change.	ree to act performa d for in C hereby co	in inis cap nce of my hapier 60 nfirm that	pactiv. I juriner agree to comply with the duties, and I am Jamiliar with and accept, F.S. Or, if this document is being filed the limited liability company has been
ionati	ire of Registered Agent			