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COVER LETTER

TO: Registration Sections

INH\$18 (2/14)

Divi	sion of Corporations				
SUBJECT:	RDR EXPRESS IMPORT AND EXPORT, LLC				
	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Offic	e Change and fe	e(s) are submitted for filing.		
Please return	all correspondence concerning this	matter to the fol	llowing:		
CRISTINA	IBEN				
	Name of Person		•		
CNA BOO	KKEEPING SERVICES LLC				
<u>, , , , , , , , , , , , , , , , , , , </u>	Firm/Company		•		
1108 KAN	E CONCOURSE SUITE 205-I	В			
	Address		•		
BAY HARI	BOR ISLANDS, FL 33154				
	City/State and Zip Code				
cnabookke	eeper@gmail.com				
E-mail	address: (to be used for future annu	al report notifica	tion)		
For further in	nformation concerning this matter, p	olease call:			
CRISTINA	IBEN	305	866-7740		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	SEET/COURIER ADDRESS: Istration Section Sion of Corporations On Building Executive Center Circle Shassee, Florida 32301	Regis Divis P.O. l	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	losed is a check for the following a	amount:			
	25 Filing Fee		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. Na	ame of the limited liability company: RDR EXPRE	SS IMPO	ORT AND	EXPORT, LLC
2. (a)		(b)		
	Principal office address of limited liability company:	_ (-)		failing address of limited liability company:
	(<i>Note: MUST BE STREET ADDRESS</i>) 10388 SUNSTREAM LANE		10388 SI	(<u>Note; MAY BE POST OFFICE BOX)</u> UNSTREAM LANE
		_		
	BOCA RATON, FL 33428		BOCA R	ATON, FL 33428
	09/10/2014	l	.1400014	1508
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	PAULO OLIVEIRA			
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	:
	EAGLE TAX REPRESENTATION CORP			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		
	5493 WILES ROAD SUITE 105			16 78.00 78.00
	COCONUT CREEK	33073		5 APR CRETA
a >	NARA CRISTINA IBEN			555
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	Se P in
		011100 800		54 - 77
	CNA BOOKKEEPING SERVICES LLC			ALE SE
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	هند
	10190 COLLINS AVE # 203			
	BAL HARBOR	33154		
signa I here provisithe objetto meri	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the interest of a member of all statutes relative to the proper and complete light of a change in the registered agent as provided by reflect a change in the registered office address, I in the proper of this change.	the regist ability con of the limited li LUIZ	tered office mpany, it is ted liability com Z GUILHE	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. ERME NIEIRO STELZER Printed or typed name of signee acity. I further agree to comply with the lattices and I am familiar with and accept
Signatu	ire of Registered Agent			

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

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