

L14066154562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

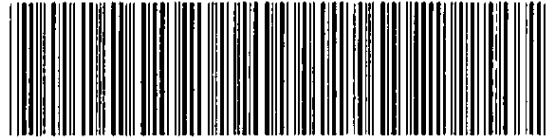
(Business Entity Name)

(Document Number)

Certific Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



400413161484

08/07/23--01004--017 **35.00

SECRETARY OF STATE
TALLAHASSEE, FL

2023 AUG -7 AM 8:37

FILED

300-1013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALMAR HOMES LLC
Name of Corporation

DOCUMENT NUMBER: 114000154562

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEX DECASTRO

Name of Contact Person

ALMAR HOMES LLC

Firm/Company

1717 NW 1 AVE

Address

BOCA RATON, FL 33432

City/State and Zip Code

alex@adekausa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alex DeCastro

Name of Contact Person

at (561)

756-4659

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ALMAR HOMES LLC

2. The principal office address: 1717 NW 1st AVE, BOCA RATON, FL 33432

3. The mailing address (if different): _____

4. Date of incorporation qualification: 2014 Document number: L14000154562

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

WHITE, EDWARD J

11175 DELTA CIRCLE, BOCA RATON, FL 33428

6. The name and street address of the new registered agent (if changed) and or registered office (if changed):

JAVIER CUEVAS

5030 S ASTOR CIR, DELRAY BEACH, FL 33484

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FL

2023 AUG -7 AM 8:37

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

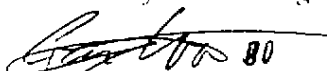


Signature of an officer or director

ALEX DECASTRO

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

06/08/2023

Date

If signing on behalf of an entity:

ALEX DE CASTRO

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR25045 (04/13)