

44000191804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

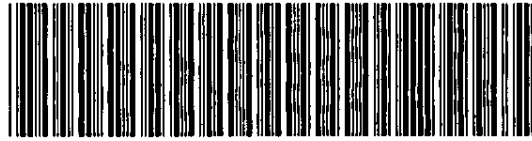
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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 APR -1 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 4, 2016

SILVANA MOTTA
1950 NW 55TH AVENUE
MARGATE, FL 33063

SUBJECT: FERREIRA & MOTTA, LLC
Ref. Number: L14000191804

We have received your document for FERREIRA & MOTTA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 416A00004573

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ferreira & Motta, LLC
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:

Carlos Ferreira
Name of Person

Ferreira & Motta, LLC
Firm/Company

1950 NW 55th Avenue
Address

Margate FL 33063
City/State and Zip Code

SV5759@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Silvana Motta
Carlos Ferreira at (210) 259-5849
Name of Person Area Code & Daytime Telephone Number
744-5144

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

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. Name of the limited liability company: Ferreira & Motta, LLC

2. (a) 1950 NW 55th Avenue (b) 1950 NW 55th Avenue
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*
Margate, FL 33063 Margate, FL 33063

3. 12-17-2014 Date of filing/registration in Florida 4. L14000191804 Document number

5. (a) United States Corporation Agents, Inc.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1950 Mears Pkwy
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Margate, FL 33063

(b) Silvana Motta
Ferreira & Motta, LLC
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

1950 NW 55th Avenue
NEW Registered Office Address:

Margate, FL 33063

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 TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
 Signature of a member or authorized representative of a member

Silvana Motta
 Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
 Signature of Registered Agent