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COVER LETTER

	Registration Section Division of Corporations					
CHDIE	ARBUZ LLC					
SUBJECT: Name of Limited Liability Company						
Dear Si	r or Madam:					
The enc	losed Registered Agent/Registered Office	e Change and f	ee(s) are submitted for filing.			
Please r	eturn all correspondence concerning this	matter to the fo	ollowing:			
VLAD	IMIR KURAEV					
	Name of Person		-			
ARBU	Z LLC					
	Firm/Company		_			
9940 \	W BAY HARBOR DR #3B-SOUTH					
	Address		_			
BAY H	IARBOR ISLANDS, FL 33154					
	City/State and Zip Code		-			
VKUR	AEV@GMAIL.COM					
E-	mail address: (to be used for future annua	al report notific	cation)			
For furt	her information concerning this matter, p	lease call:				
VLADI	IMIR KURAEV	305	3310223			
	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	Reg Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314			
	Enclosed is a check for the following a	mount:				
	2 \$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.

ARRUZ LLC

 Na (a) 	ume of the limited liability company: 9940 W BAY HARBOR DR	(h	9940 W	BAY HARBOR DR	<u></u>		
2. (a) <u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 3B-SOUTH	(0		Mailing address of limited li. (Note: MAY BE POST O	_		·
	BAY HARBOR ISLANDS, FL 33154	<u> </u>	BAY HAF	RBOR ISLANDS, F	L 331	54	_
	02/05/2015		L1500002	21608			
3.	Date of filing/registration in Florida KURAEV, VLADIMIR	4.		Document number	<u> </u>		
5. (a)	Registered Agent and Registered Office shown on the records of 3300 NE 192ND ST	the Florida	Dept. of State	::			
	Registered Office Address (MUST BE FLORIDA STREET) PH 16	ADDRESS	1				
	AVENTURA , FL	33180					
(b)	KURAEV, VLADIMIR				SIA 10	17	
•	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	iress:		Š		\neg
	9940 W BAY HARBOR DR				of cu	JUL 25	<u></u>
	NEW Registered Office Address: 3B-SOUTH				DIVISION OF CURFOFATIONS	PH 2:	
	BAY HARBOR ISLANDS, FL	33154	. <u></u> .		CHORS	54	
the cha agent v	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regisability co of the lim limited l	stered office impany, it is ited liability	e and the business offices hereby confirmed that y company or as otherwipany.	ce of the	e registe ange(s)	ered
Signa	ture of a member or authorized representative of a member			Printed or typed name of s	signee		
provisi the obl to mer	by accept the appointment as registered agent and aging ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I if I in writing of this change.	ree to act perform d for in (hereby co	in this cape ance of my c Chapter 605 onfirm that t	acity. I further agree t luties, and I am famili , F.S. Or, if this docu the limited liability cor	to comp ar with ment is mpany i	ly with and ac being fi as bee	the cept iled n
Signatu	re of Registered Agent						