

LIS000022042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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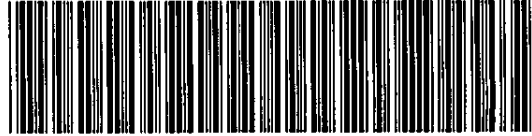
(Business Entity Name)

(Document Number)

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SEALING STATE  
TALLAHASSEE, FLORIDA

SEP 14 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TRAFFILOG AMERICA, 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:

RUDI SLOCHOWSKI  
Name of Person

TRAFFILOG AMERICA, LLC.  
Firm/Company

20900 NE 30<sup>th</sup> Ave. Suite 407  
Address

AVENTURA FL 33180  
City/State and Zip Code

RUDI@TRAFFILOGAMERICA.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rudi Slochowski at (786) 554. 5574  
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

**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: TRAFFICLOG AMERICA, LLC
2. (a) 20900 NE 30<sup>th</sup> AVE (b) 20900 NE 30<sup>th</sup> AVE.  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
Suite 407 Suite 407  
AVENTURA FL 33180 AVENTURA FL 33180
3. 02/05/2015 4. L15000022042  
Date of filing/registration in Florida Document number
5. (a) AVISHAI E. SLOCHOWSKI  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
20900 NE 30<sup>th</sup> AVE.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Suite 407  
AVENTURA, FL 33180
- (b) RUDI SLOCHOWSKI  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
20900 NE 30<sup>th</sup> AVE.  
**NEW Registered Office Address**:  
Suite 407  
AVENTURA, FL 33180

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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

Rudi Slochowski  
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