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(Requestor's Name)					
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☐ WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certificates of	of Status				
Special Instructions to Filing Officer:					
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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations						
SUBJECT: MP OFFICE ENTERPRISE LLC (MP OFFICE ENTERPRISE LLC (DBA SOLUTION BUSINESS EXPERTS)					
	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	er to the following:					
MILTON PORTILLO						
Name of Person						
MP OFFICE ENTERPRISE LLC						
Firm/Company						
1248 ROSE GATE BLVD						
Address						
RIVIERA BEACH, FL 33404						
City/State and Zip Code						
MPORTILLO@SOLBEX.COM						
E-mail address: (to be used for future annual rep	ort notification)					
For further information concerning this matter, please	call:					
MILTON PORTILLO	561 633-3800					
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 amou	nt:					
☑ \$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.

	me of the limited liability company: MP OFFICE E MONICA Y TORRES	NTEF	RPRISE LL	.C
2. (a) ₋	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1248 ROSE GATE BLVD	_ (1	b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	RIVIERA BEACH, FL 33404	_		
	2/12/2015		L1500002	27009
3. 5. (a)	Date of filing/registration in Florida MGR	4.		Document number
,, (a)	Registered Agent and Registered Office shown on the records of the MONICA Y TORRES	e Florid	a Dept. of State	- e:
	Registered Office Address (MUST BE FLORIDA STREET AD 1248 ROSE GATE BLVD	DDRES	<u>S)</u>	• \$4.
	RIVIERA BEACH ,FL	33404		15 SEP
(b)	MANAGING DIRECTOR) eq.		P17
	Enter name of NEW Registered Agent and/or NEW Registered Office address: MILTON PORTILLO		AH 8:37	
	NEW Registered Office Address: 1248 ROSE GATE BLVD			- 405 - 405
	RIVIERA BEACH , FL	33404		
the cha agent was/we the arti	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability and affirmative.	he regoility control the linited	istered office ompany, it is nited liability	e and the business office of the registere is hereby confirmed that the change(s) by company or as otherwise provided in inpany. ORRES
I herel provisi the obli to mere notified	ure of a member or authorized representative of a member by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ily reflect a change iff the registered office address, I he if in writing of this change. The of Registered Agent	e to ac perforn for in preby c	t in this cape vance of my o Chapter 605 confirm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accep i, F.S. Or, if this document is being filea the limited liability company has been

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