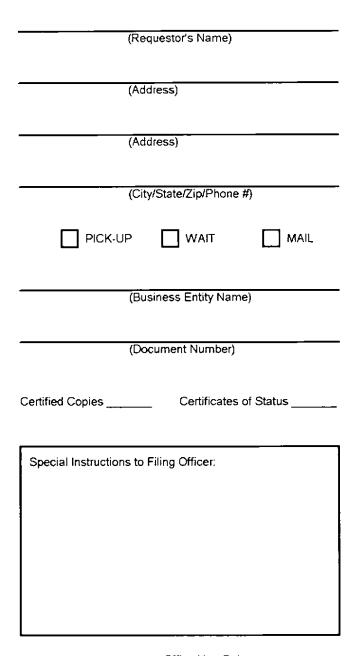
## L15000028983



Office Use Only



300364362413

05/12/21--01010--002 \*\*25.00

2021 MAY 12 PH 12::07

JUN 2 3 2021 R. HUNT

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: FONTAWA EXPORT LL  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:		
Luz. E. Fontanez  Name of Person  Luz. E. Fontanez  Firm/Company	_	
515 Hummingbird, ct	_	
Kissimmer Harida 34759 City/State and Zip Code	_	
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
	) 220-5798 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
□ \$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.

3. Date of filing/registration in Florida  5. (a) DANIEL LONTAINEZ MENDEZ  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	·
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1050 Mowland Blud. Deltong  FL 32738  (b) Luz E. Fontanyz  Enter name of NEW Registered Agent and/or NEW Registered Office address:  Luz E. Fontanyz  NEW Registered Office Address:  515 Humming bird Ct.	DIVISION OF CORPORATIONS  2021 MAY 12 PM 12::07
If the limited liability company is not organized under the laws of the State of Florida, it is hereby change or changes are made, the Florida street address of the registered office and the business offi agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed was/were authorized by an affirmative vote of the members of the limited liability company or as of the articles of organization or the operating agreement of the limited liability company.  Signature of member or authorized representative of a member  Printed or typed name of the appointment as registered agent and agree to act in this capacity. I further age provisions of all statutes relative to the proper and complete performance of my duties, and I am fathe obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this at the member of this change in the registered office address, I hereby confirm that the limited liability notified in writing of this change.	ice of the registered d that the change(s) otherwise provided in

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

Signature of Registered Agent