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Special Instructions to Filing Officer:							





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COVER LETTER

то:		istration Section sion of Corporations		•	
SUBJI	ECT:	7450 NORTH MIAMI AVENU	E, LLC		
Name of Limited Liability Company					
Dear S	ir or N	Madam:			
The en	closed	l Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.	
Please	return	all correspondence concerning	g this matter to th	e following:	
BENJA	AMIN	WOLKOV			
		Name of Person			
CALD	ERA I	AW			
		Firm/Company			
7293 N	W 2N	D AVE			
		Address			
MIAM	0. FL 3	33150			
		City/State and Zip Coo	de		
jesse@	calder	a.law			
F	-mail	address: (to be used for future	annual report no	tification)	
For fur	ther in	nformation concerning this ma	tter, please call:		
Jesse P	otterve	eld	786 at (321-3811	
		Name of Person		Area Code & Daytime Telephone Number	
	Reg Divi P.O.	ling Address: istration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enci	losed is a check for the follow	ing amount:		
	■ \$2	25 Filing Fee		\$55 Filing Fee & Certified Copy	
INHST	8 (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.

1. N	ame of the limited liability company: 7450 NORTH	MIAMI AVE	NUE, LLC		
2. (a)		(h)			
. (.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited (Note: MAY BE POST	l liability compan	y:
	7338 NW MIAMI COURT				
	MIAMI, FL 33150				
	02/24/2015	I	.15000034432		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)					
(-)	Registered Agent and Registered Office shown on the records AXS LAW GROUP PLLC	of the Florida I	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS)	· · ·	1	20
	2121 NW 2ND AVE, SUITE 201			`, .	2022 8
	MIAMI	FL 33127		· .	SE - 2
(b)	BENJAMIN WOLKOV			· ·	23 PH
(0)	Enter name of NEW Registered Agent and/or NEW Register	ress:	Ċ	<u>ٿ</u> : بب	
	CALDERA LAW				03
	NEW Registered Office Address:				
	7293 NW 2ND AVE				
	MIAMI	FL_33150			
change agent v was/w the arti	imited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membersicles of organization or the operating agreement of the ture of a member or authorized representative of a member	laws of the S he registered liability com s of the limit	office and the business office of pany, it is hereby confirmed the ed liability company or as othe	of the registere at the change(rwise provided	:d s)
I here provisi the obl to mer notified	by accept the appointment as registered agent and a sions of all statutes relative to the proper and completigations of my position as registered agent as providely reflect a chappe in the registered office address, d in writing of this change.	gree to act in te performan ded for in Ch I hereby con	a this canacity. I further agree	to comply with	h the ccept filed en