

L15000035319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

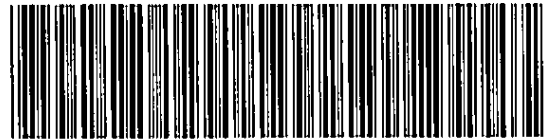
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

O SIMMONS

MAY 04 2019

COVER LETTER

TO: Registration Section
Division of Corporations

Corkoni LLC

SUBJECT: _____
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:

Ana Maria Vazquez

Name of Person

Ana Maria Vazquez

Firm/Company

6310 N Ocean Blvd

Address

Boynton Beach FL 33435

City/State and Zip Code

anamariav68@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ana Maria Vazquez

561

3039476

at (_____) _____

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.

Corkoni LLC

1. Name of the limited liability company: Corkoni LLC
6310 N Ocean Blvd, Boynton Beach FL33435 6310 N Ocean Blvd, Boynton Beach FL33435

2. (a) Principal office address of limited liability company: (b) Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

02/25/2015

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3. Date of filing/registration in Florida 4. Document number
Serber & Associates P.A.

5. 1a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2875 NE 191st Street Suite 801

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Aventura 33180
FL

Ana Maria Vazquez

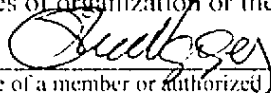
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

6310 N Ocean Blvd

NEW Registered Office Address:

Boynton Beach 33435
FL

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.

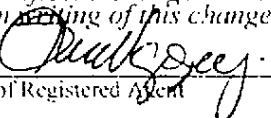


Signature of a member or authorized representative of a member

Ana Maria Vazquez

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 of Registered Agent

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