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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Setai 3903 PH Name of Limited	LLC Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change an	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
Rogerio de Laurenzio Name of Person	
Setai 3903 PH LLC Firm/Company	
355 Alhambia Cicle	±1550
Coral Gables, FL 33134 City/State and Zip Code	<u></u>
E-mail address: (to be used for future annual report not	tification)
For further information concerning this matter, please call:	
Rogerio de Laurenzio at (781) Name of Person	6) 233-8368 Area Code & Daytime Telephone Number
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$ \$25 Filing Fee

Enclosed is a check for the following amount:

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 Na	me of the limited liability company: 50 taj 3903 PH, LLC
2. (a)	DLA Piper, LLP (michael Silva) (b) DLA Piper, LLP (michael Silva)
2. (a)	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	200 S. Biscayne Blud. Str 2500 200 S. Biscayne Blud Str 250
	Miami, Fl 33131 Miami, Fl 33131
	02/26/2015 L.150000 36743
3.	Date of filing/registration in Florida 4. Document number
5. (a)	NIRAI Services, Inc.
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	1200 S. Pine Island Rd
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Plantation, FL. 33324
	, FL
(b)	Rogerio de Laurenzio Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Rocció de la vicenzia
	NEW Registered Office Address:
	355 Alhambra Circle. Ste 1550
	Coral Gables , FL 33134
the cha	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Of, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
	cles of organization of the offering agreement of the limited liability company.
Signat	ure of a member or authorized representative of a member Koger to de Courenzio Printed or typed name of signee
I harak	we account the approintment as registered agent and garee to act in this canacity. I further garee to comply with the
provision the oblition to mere notified	to accept the appointment as registered agent that agree to uch in inscapatify. I further agree to complete ones of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office gadress, I hereby confirm that the limited liability company has been I in writing of this change.
×	

Signature of Register d Agent