L15000038586

(Requ	estor's Name)				
(Addre	ess)				
(Addre	ess)				
(City/S	State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Busin	ess Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Fili	ng Officer:				





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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2016

MIGUEL ADRIANO FREITAS CARVALHO 8386 VIA SERENA BOCA RATON, FL 33433

SUBJECT: LEME HOLDINGS LLC Ref. Number: L15000038586

We have received your document for LEME HOLDINGS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00019202

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

Division of Comparations D.O. POV 6997 Tallahassas Florida 9991



August 19, 2016

MIGUEL ADRIANO FREITAS CARVALHO 8386 VIA SERENA BOCA RATON, FL 33433

SUBJECT: LEME HOLDINGS LLC Ref. Number: L15000038586

We have received your document for LEME HOLDINGS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00017660

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations	
SUBJECT: LEME HOLDINGS LLC	ited Liability Company
Name of Lim	ned Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
MIGUEL ADRIANO FREITAS CARVALHO	
Name of Person	
LEME HOLDINGS LLC	
Firm/Company	
8386 VIA SERENA	
Address	
BOCA RATON FLORIDA 33433	
City/State and Zip Code	
ADRIANO@CARVALHO.COM	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	ıll:
MIGUEL ADRIANO F CARVALHO 30	5 8572827
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.

i. Na	ume of the limited liability company: LEME HOLDI	NGS L	.LC				
2. (a)	LEME HOLDINGS LLC		(b) LEME HOLDINGS LLC				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	8386 VIA SERENA		8386 VIA	SERENA			
	BOCA RATON FLORIDA 33433	_	BOCA RATON FLORIDA 33433				
	03/03/2015		L1500003	8586			
3.	Date of filing/registration in Florida	4.		Document nur	nbe	er	
5. (a)	MIGUEL ADRIANO F CARVALHO						
. (u)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of State:				
	Registered Office Address 8386 VIA SERENA	DDRES	Sì				
	BOCA RATON , FL	33433				1:	
(b)	BROKERINVESTE LLC			<u> </u>		12.73 12.73 12.73	
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	idress:	30 r 173	컰	⊕ 22	요한 대한 1 제 한 기 제한 시기 하였다 하니 기
	BROKERINVESTE LLC			RELECTION OF	¥ 2€ X	? >>	
	NEW Registered Office Address:			OR	Ä	ထု	
	8386 VIA SERENA			IDA,	لما	26	
	BOCA RATON, FL	33433					
the cha agent w was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- bre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi bility c f the lin	istered office ompany, it is nited liability	and the busine hereby confir- company or a	ess me	office d that t	of the registered the change(s)
		MI		IANO F CA			
	ture of a prember or authorized representative of a member			Printed or typed			
provisi the obl to mere notified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect d change in the registered office address. It is writing of this change: The office is the change of th	ee to ac perforn I for in iereby c	et in this capa nance of my d Chapter 605, confirm that th	city. I further uties, and I an F.S. Or, if th he limited liab	ag n fc is a pilit	ree to amiliar locume y comp	comply with the with and accept ent is being filed cany has been
- Jonata	S outcomment rigent						

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