L150000 63343

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TO AUG 22 PM 4: 55

AUG 23 2016

S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		
3410 SW 59 TERR, LLC SUBJECT:		
	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
ELI AHMADOV		
Name of Person		
Firm/Company	_ 	
1110 NE 16 PLACE #1		16 AUG
Address		322
FORT LAUDERDALE, FL 33305		₽ -
City/State and Zip Code		£: 55
eli.ahmadov@gmail.com		٠,
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter, please	e call:	
Eli Ahmadov	954 770-2740	
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 amou	int:	
☑ \$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.

2. (a)	1110 NE 16 PLACE		(b) 1110	NE 16 PLACE	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited l	
	#1		#1		
	FORT LAUDERDALE, FL 33305		FORT	LAUDERDALE, FL	33305
	4/10/2015		L15000	0063343	
3.	Date of filing/registration in Florida	- 4.		Document number	
5. (a)	ELI AHMADOV				
()	Registered Agent and Registered Office shown on the records of 1110 NE 16 PLACE	the Flori	da Dept. of S	State:	THE AUG
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>(2.5)</u>		1/2/ 1/2/ 16 22
	#1				.71
	FORT LAUDERDALE		유 마위 -		
(b)	ELI AHMADOV			_	25 CS
	Enter name of NEW Registered Agent and/or NEW Registere	d Office :	ddress:		
	12636 NW 24TH PL				
	NEW Registered Office Address:			_	
	SUNRISE , F	3332	3		
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members clessof organization or the operating agreement of the large of a member or authorized representative of a member	f the reginability of the limited	gistered of company, mited liab	fice and the business offi it is hereby confirmed the ility company or as other company.	ce of the registered at the change(s) wise provided in
Ū	by accept the appointment as registered agent and ag	ree to o	ct in this c	• •	_
provisi the obl to mere	by accept the appointment as registered agent and agonous of all statutes relative to the proper and complete igations of my position as registered agent as providely yellocifa change in the registered office address, I d in writing of this change.	perfor ed for it hereby	mance of n Chapter (confirm th	apachy. I father agree ny duties, and I am famil 605, F.S. Or, if this docu nat the limited liability co	iar with and accep ment is being filed mpany has been

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

Signature of Registered Agent