4500118455

(Requestor's Name)							
(Address)							
(Address)							
(100.000)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
, ,							
(Dogument Number)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



400311661154

04/13/18--01017--021 **25.00

2018 APR 13 PM 1: 08

APR 13 2018

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Division of Corporations							
PRETT DEVELOPERS, LLC	PRETT DEVELOPERS, LLC						
	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:						
Mercedes M. Sellek, Esq							
Name of Person							
M&S CORPORATE SERVICES, LLC							
Firm/Company							
2333 Ponce de Leon Blvd., Suite 314							
Address							
Coral Gables, FL 33134							
City/State and Zip Code							
ms@mscorpserv.net							
E-mail address: (to be used for future annual report noti	fication)						
For further information concerning this matter, please call:							
Mercedes M. Sellek, Esq. 786	539-1425						
Name of Person	Area Code & Daytime Telephone Number						
Registration Section Robivision of Corporations D Clifton Building P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314						
Enclosed is a check for the following amount:							
☑ \$25 Filing Fee	355 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

1 3	James of the Hissiand Highilian common PRETT DEVE	ELOPE	RS, LLC			
	888 KINGMAN ROAD	(b	888 KINI	GMAN ROA	AD	
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (of limited liability co	
	HOMESTEAD, FL 33035	_	HOMEST	ΓEAD, FL 3	3035	
		_				
	07/09/2015	_	L1500011	8455		
3.	Date of filing/registration in Florida	4.		Document nu	ımber	
5. (a	MSJ CORPORATE SERVICES, LLC				∑₀ 23	
J. (u)	Registered Agent and Registered Office shown on the records of 2333 PONCE DE LEON BLVD.	the Florida	Dept. of State:	:	2010 APR Segket Allaha	ïi:
	Registered Office Address (MUST BE FLORIDA STREET A	4DDRESS	5)		TARY ASSE	p
	SUITE 314	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			APR 13 PM 1:08 CRETARY OF STATE LAHASSEE. FLORID	<u> </u>
	CORAL GABLES , FL	33134			STAIL LORN	C
(b	M&S CORPORATE SERVICES, LLC				# d = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	
(0	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:			
	2333 PONCE DE LEON BLVD.					
	NEW Registered Office Address:		.			
	SUITE 314					
	CORAL GABLES , FL	33134				
the c agent was/	e limited liability company is not organized under the law hange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited limited by an affirmative vote of the members of the operating agreement of the	the regiability confither the line	stered office ompany, it is nited liability liability com	and the busing the and the busing the confiner of the company or apany.	ness office of th irmed that the cl as otherwise pr	e registered hange(s)
Sig	nature of a member or authorized representative of a member			Printed or type	d name of signee	
provi the o	reby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide prely reflect a change in the registered office address, I fied in writing of this change	ree to ac perform d for in hereby c	t in this capa ance of my c Chapter 605, onfirm that t	acity. I furthe luties, and I a , F.S. Or, if t the limited lia	er agree to comp um familiar with his document is ability company	ply with the and accept being filed has been
Sign	thure of Registered Agent					

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