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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:

Registration Section

Division of Corporations								
SUBJECT:JA Of	tero Consul	lting, 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:						
Jorge A Otero								
Name of Person		<del></del>						
J A Otero Consulting LLC								
Firm/Company		<del></del>						
PO Box 160785								
Address	• •	The second sequences	₩ <b>2</b>					
: 1,6 % ← <b>Miami, Fl. 33116</b> # - %	ese <b>o</b> ff		2016 NOV -1 P 12: 15 SECRETARY OF STATE ALLAHASSEE, FLORID	•				
City/State and Zip Code		_	N - N					
jaoteroconsulting@gmail.com			T 05					
E-mail address: (to be used for future annua	l report notifi	cation)	27 S. 75 S.					
For further information concerning this matter, pl	ease call:		NE ANDA					
Jorge A Otero	305	300 2752						
Name of Person		Area Code & Daytime Telepl	hone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Rep Div P.C	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following an	mount:							
<b>☑</b> \$25 Filing Fee	<b>□</b> \$5	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.

1. Na	ame of the limited liability company: J A Otero Co	onsultir	ιg,	LLC			. <u></u>	
2. (a)	3560 NW 59 St Miami, Fla. 33142		(b)	PO Box	160785 M	liami, Fl. 3	3116	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address ( (Note: MAY)			
	3560 NW 59 St Miami, Fla. 33142			PO Box	160785 M	iami, Fl. 3	3116	
	08/26/2015			L150001	44070			
3.	Date of filing/registration in Florida	4.			Document no	umber		
5. (a)	Jorge A Otero							
J. (a)	Registered Agent and Registered Office shown on the records of	f the Flori	da I	Dept. of State	D:			
	Old Address: 6405 NW 36 St Suite 126 M	iami, F	1. (	33166				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE:	<u>(22</u>					
	New Address: 3560 NW 59 St					₹ <sub>o</sub>	2	
	Miami , F	L_3314	2		-	ECRE	2016 NOV	71
(b)	Jorge A Otero					TARY ASSE	1	F
` `	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ıddı	ress:	•	rogram	ס	(1)
	3560 NW 59 St					STATE LORID	ا ت	U
	NEW Registered Office Address:					A	ഗ	
	Miami	3314	2		-			
10.4 1				u . CDI			1.1	
the cha agent v was/we	imited liability company is not organized under the la inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members cles of dreadization of the operating agreement of the	f the reginability of the li	gist cor mi	ered office npany, it is ted liability	e and the busi s hereby conf y company or	ness office	of the r he char	registered
					Jorge A C			
_	ture of a member or authorized representative of a member				Printed or type	•		
provisi the obl to mere	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a charge in the registered office address, I d in writing of this change.	e perfort ed for in hereby	ma Ci coi	nce of my a hapter 605 nfirm that i	duties, and La s, F.S. Or, if i the limited lid	er agree to c am familiar this docume ability comp	comply with a nt is be any ha	with the nd accept sing filed s been
Cia	X/Thro	l	0	/24/	2016			
Signatu	re of Registored Agent		1	•				
	Division of Corporations • P.O. FILING I				see, FL 3231	4		