L15000/63021

(Requestor's Name)			
(Add	ress)		
(Add	ress)		
(City	/State/Zip/Phon	ne #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to F	iling Officer:		
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Office Use Only



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DIVISION OF CORPORATIONS

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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations				
Division of Corporations				
SUBJECT: MOGINGS GROUP ILC.				
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:				
Jaine Peisach				
Name of Person				
11061 HOLDINGS GROUP LLC				
Firm/Company				
Word				
MOGINE GTH AVE				
/ Add. 635				
City/State and Zip Code				
and the or Ocasil can				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Jaime Paised. 305, 794-2011				
Taime Person at (305) 794-2011 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
Registration Section Registration Section				
Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314				
Tallahassee, Florida 32301				
Enclosed is a check for the following amount:				
\$25 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. Na	ame of the limited liability company: 1061 HOLDINGS GROUP LLC	
2. (a)	11061 NE 674 AVE (b) 1/061 NE 674	AVE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability (Note: MAY BE POST OFFICE)	
	MIANI FC 33161 MIANI FL	33161
	<u> </u>	30101
3. 5. (a)	Date of filing/registration in Florida CONTAIRT, STEVEN D. ESA.	. 1
3. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	16 NOV
(b)	FL Soch Enter name of NEW Registered Agent and/or NEW Registered Office address:	16 NOV -7 PM 1:21 DIVISION OF CERPORATIONS
	11061 NE 6 th Axe	
	NEW Registered Office Address: WIAWI, FL 33161	
	,FL_33161	
the chagent was/w	limited liability company is not organized under the laws of the State of Florida, it is hereby confirme ange or changes are made, the Florida street address of the registered office and the business office of will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the vere authorized by an affirmative vote of the members of the limited liability company or as otherwise ticles of organization on the operating agreement of the limited liability company.	f the registered e change(s)
Sign	ature of a member or authorized representative of a member Printed or typed name of signed	e
There provis the ob to mer	eby accept the appointment as registered agent and agree to act in this capacity. I further agree to co cions of all statutes relative to the proper and complete performance of my duties, and I am familiar w ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document rely reflect a change in the registered office address, I hereby confirm that the limited liability compared in writing of this change.	mply with the rith and accept is being filed ny has been
Signati	ure of Registered Agent	

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 F1LING FEE: \$25.00