L15 000 180075

(Requestor's Name)				
(Address)				
(155155)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

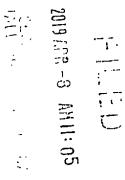
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NINAN REAL ESTATE LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
PAULO DE BASTOS				
Name of Person	·			
REGISTERED AGENT SERVICES OF I	FLORIDA LLC			
Firm/Company				
8551 W SUNRISE BLVD SUITE 100				
Address				
PLANTATION, FL 33322				
City/State and Zip Code				
admin@hodeba.com				
E-mail address: (to be used for future annu	al report notification)			
For further information concerning this matter, p	please call:			
PAULO DE BASTOS	954 4520030			
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 a	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.

	me of the limited liability company: 12025 RIVERHILLS DR	12025 RIVERHILLS DR		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	TAMPA, FL 33617	TAMPA	A, FL 33617	
	10/22/2015	 L15000 ²	180075	
3.	Date of filing/registration in Florida	4.	Document number	
	INTERNATIONAL TAX & COMMERCE ADV	ISORS LLC		
5. (a)	Registered Agent and Registered Office shown on the records of th		ate:	
	12025 RIVERHILLS DR			
	Registered Office Address (MUST BE FLORIDA STREET AD	DDRESS)	_	
	TAMPAFLS	33617		
(b)	REGISTERED AGENT SERVICES OF FLOR	IDA LLC	2019 APR	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office address:	- FD	
	8551 W SUNRISE BLVD SUITE 100		- B	
	NEW Registered Office Address:		AHII: 05	
	PLANTATION	33322	<u></u>	
the cha agent w was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he registered offi pility company, it the limited liabil	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in	
		PAULO DE	BASTOS, manager	
Signat	ure of a member or authorized entranslative of a member		Printed or typed name of signee	
provision the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act in this ca verformance of m for in Chapter 60 vereby confirm tha	pacity. I further agree to comply with the v duties, and I am familiar with and acce 105, F.S. Or, if this document is being file at the limited liability company has been	

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

Signature of Registered Agent-