## 15000/8/406

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K. SALY EXAMINER MAK 30

## **COVER LETTER**

	stration Section sion of Corporations				
SUBJECT:	951 BRICKELL #2608, LLC	)			
SUBJECT:	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Of	fice Change a	nd fee	(s) are submitted for filing.	
Please return	all correspondence concerning the	nis matter to t	he foll	owing:	
Luis A. Qu	iintana				
	Name of Person				
951 BRIC	KELL #2608, LLC				
	Firm/Company				
2927 Case	cada Isle Way				
	Address				
Cooper Ci	ty, FL 33024				
	City/State and Zip Code	******			
laquintana	a@gmail.com				
E-mail	address: (to be used for future an	nual report no	otificat	ion)	
For further is	nformation concerning this matter	, please call:			
Luis A. Qu	intana	305 at (	)	769-8728	
	Name of Person		A	rea Code & Daytime Telephone Number	
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations ton Building I Executive Center Circle ahassee, Florida 32301		Regist Division P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314	
Enc	losed is a check for the following	g amount:			
<b>2</b> \$2	25 Filing Fee		\$55 F	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.

ame of the limited liability company:	_L #2608, I	
10321 sw 17th St, Miami, FL 33165	(b)	0321 sw 17th St, Miami, FL 33165
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
10/26/2015		5000181406
Date of filing/registration in Florida  Luis A. Quintana	4.	Document number
	the Florida Dep	it. of State:
Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
Cooper City , FL	33024	2016 HAR GALLAHA
Nancy L. Brown		<u>~~</u> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Enter name of NEW Registered Agent and/or NEW Registered	Office address	
7700 N Kendall Drive #407		
NEW Registered Office Address:		<del></del>
Miami , FL	33156	
inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited list are authorized by an affirmative vote of the members of	the registere ability compa of the limited limited liabi	ed office and the business office of the register any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
ture of a member or authorized representative of a member		Printed or typed name of signee
by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ly reflect a change in the registered office address, I is din writing of thir change.	ee to act in t performance d for in Chap hereby confil	this capacity. I further agree to comply with to e of my duties, and I am familiar with and acc oter 605, F.S. Or, if this document is being fil orm that the limited liability company has been
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  10/26/2015  Date of filing/registration in Florida Luis A. Quintana  Registered Agent and Registered Office shown on the records of 2927 Cascada Isle Way  Registered Office Address (MUST BE FLORIDA STREET)  Cooper City  Nancy L. Brown  Enter name of NEW Registered Agent and/or NEW Registered 7700 N Kendall Drive #407  NEW Registered Office Address:  Miami  FL  imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liedentical of the case of a Florida limited liedentical or, in the case of a Florida limited liedentical of the proper and complete ligations of my position or the operating agreement of the land of all statutes relative to the proper and complete ligations of my position as registered agent as provide ligations of my position as registered agent as provide ligations of my position as registered agent as provide ligations of my position as registered agent as provide proper in the registered agent as provide of the registered agent as provide of the registered office address. I	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  10/26/2015  Date of filing/registration in Florida 4.  Luis A. Quintana  Registered Agent and Registered Office shown on the records of the Florida Dep 2927 Cascada Isle Way  Registered Office Address  MUST BE FLORIDA STREET ADDRESS)  Cooper City  Salona  Enter name of NEW Registered Agent and/or NEW Registered Office address 7700 N Kendall Drive #407  NEW Registered Office Address:  Miami  Binited liability company is not organized under the laws of the State ange or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability compare authorized by an affirmative vote of the members of the limited cles of organization or the operating agreement of the limited liability company is not the operating agreement of the limited liability of a second or of the state of a second of the second of

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