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## **COVER LETTER**

TO:

INHS18 (2/14)

Registration Section

Division of Corporations GILBERTO C MAINTENANCE SERVICES LLC SUBJECT: 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: Gilberto C Puente Name of Person Gilberto C Maintenance Services LLC Firm/Company 1440 E Mowry Dr APT 103 Address Homestead . Florida 33033 City/State and Zip Code ipekikin@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gilberto C Puente Hernandez Area Code & Daytime Telephone Number Name of Person MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & Certified Copy **2** \$25 Filing Fee

## 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

I. No	ame of the limited liability company: GILBERTO	C MAINTEI	NANCE SERVICES LLC	
2. (a)	1440 E Mowry Dr APT 103	(b) 1440 E Mowry Dr APT 103		
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(")	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Homestead, Fl 33033	
	Homestead, FI 33033	H		
	October 27, 2015	L1	5000182609	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	GILBERTO C PUENTE SR.			
	Registered Agent and Registered Office shown on the records of 14217 SW 102 ST	pt. of State:		
	Registered Office Address	sen.		
	MIAMI , F	33186 L	2011 JUL 30 SECRETARN TALLAHASSI	
	GILBERTO C PUENTE SR.		30 30 A	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	1440 E Mowry Dr APT 103		O RE PLORIDA	
	NEW Registered Office Address:		<b>∌</b> ™ <b>~</b>	
	Homestead , F	L 33033		
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address civil be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the register liability comp of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member	<del></del>	Printed or typed name of signee	
provisi the obl to mere notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address. I I in writing of this change.	gree to act in e performanc ed for in Cha l hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been	
Senatu	e of Registered Agent			

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

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