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PICK-UP	☐ WAIT	MAIL
	usiness Entity Nar	
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(Do	ocument Number)	<u> </u>
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S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations				
	trnents, LLC e of Limited Liability Company			
Dear Sir or Madam:				
	Change and Section and subscript of Section			
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for illing.			
Please return all correspondence concerning this	s matter to the following:			
Marian Angel				
D'B INVestreeals,	LLC			
3565 SW Lot Ave				
Miami, FL 33145 City/State and Zip Code	PH 1: 27			
mariam_angel Eshotmai E-mail address: (to be used for future annu	ial report notification)			
For further information concerning this matter, p	please call:			
Mallary Argel Name of Person	at (786) 4893001_ 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 amount:				
\$25 Filing Fee	☐ \$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. N	Name of the limited liability company: D.B. INESTYNEITS, LLC	
2. (a)	(a) 3565 SW 1.51- AVC. (b) 3565 SW 1.51	Ave
U , (u)	Principal office address of limited liability company: Mailing address of limited lia	
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OF	2.115
	Miami, FL 33145 Miami, FL 33	<u> </u>
		
	01/11/2016 L16000007565	
3.		
5. (a	(a) Mariam Angel	
Ì	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	210.55 NE 37th Ave.	18
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	2808	馬丁
	Aventura33180	SILED SIT P
		ED 7 PH W 27
(b)	(b) Maliam AngaL Jassii, PA. Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	27
	3565 JW 1st Ave.	•
	NEW Registered Office Address:	
	Miami , FL 33145	
	the limited liability company is not organized under the laws of the State of Florida, it is hereby confir	
the ch agent	ie change or changes are made, the Florida street address of the registered office and the business office gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that	of the registered the change(s)
	as/were authorized by an affirmative vote of the members of the limited liability company or as otherwise articles of organization or the operating agreement of the limited liability company.	ise provided in
	maniferational Mariam Angel	
Sign	Signature of a member or authorized representative of a member Printed or typed name of signature of a member Printed o	inec
provis the ob- to me	hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to rovisions of all statutes relative to the proper and complete performance of my duties, and I am familia to obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum merely reflect a change in the registered office address, I hereby confirm that the limited liability comotified in writing of this change.	comply with the r with and accept ent is being filed pany has been
	muruvarelx	

Signature of Registered Agent