

L16000008013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

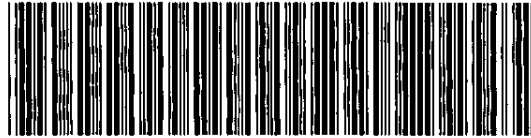
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2016 OCT 18 AM 11:06

FILED

K. SALY

OCT 19 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2016

DALI ENGINEERING AND CONSULTING LLC
LINA PARRA
950 SW 57 AVE. #610
WEST MIAMI, FL 33144

SUBJECT: DALI ENGINEERING AND CONSULTING LLC
Ref. Number: L16000008013

RECEIVED
2016 OCT 18 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DALI ENGINEERING AND CONSULTING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 616A00021117

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DALI ENGINEERING AND CONSULTING LLC
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:

LINA PARRA
Name of Person

DALI ENGINEERING AND CONSULTING LLC
Firm/Company

950 SW 57 AVE. # 610
Address

WEST MIAMI, FL 33144
City/State and Zip Code

NALITA007@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LINA PARRA at (786) 7578411
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 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.

1. Name of the limited liability company: DALI ENGINEERING AND CONSULTING LLC

2. (a) 1805 PONCE DE LEON BLVD # 631 (b) 1805 PONCE DE LEON BLVD #631

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

CORAL GABLES, FL 33134

CORAL GABLES, FL 33134

JANUARY 12, 2016

L16000008013

3. Date of filing/registration in Florida

4. Document number

5. (a) LINA PARRA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1805 PONCE DE LEON BLVD # 631

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

1805 PONCE DE LEON BLVD # 631

CORAL GABLES, FL 33134

(b) LINA PARRA / 950 SW 57 AVE. # 610

Enter name of NEW Registered Agent and/or NEW Registered Office address:

WEST MIAMI, FL 33144

NEW Registered Office Address:

950 SW 57 AVE. # 610

WEST MIAMI, FL 33144

DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA
 2016 OCT 18 AM 11:03
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Lina Parra
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent