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COVER LETTER

TO:	Registration Section
	Division of Corporations

One Hospitality 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:

Joseph Schwantes

Name of Person

One Hospitality LLC

Firm/Company

6750 NE 4th Ct

Address

Miami Florida 33138

City/State and Zip Code

margie@regionalone.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chen Nagid	786 325-9981		
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		
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.

6750 NE 4th Ct Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	6750 NE 4	th CT
· · · ·	(0,		
Miami FI 33138			ling address of limited liability company: Note: MAY BE POST OFFICE BOX
		Miami FL 3	3138
03/14/2016		_160000525	558
Date of filing/registration in Florida Joseph Schwantes	4.	Do	ocument number
6750 NE 4th Ct			
	33138		FIL 17 OCT 23 SL AND AND MUTANASS
	Office add	<u>ress</u> :	
NEW Registered Office Address:	<u>_</u>		8: 35 STATE LORIDA
Sweetwater	33172		
The of changes are made, the Florida street address of illue identical. Or, in the case of a Florida limited lia chathorized by an affirmative vote of the members of les of organization or the operating agreement of the pre-of a member or authorized representative of a member w accept the appointment or preferred quant and oper-	the regist ability cor f the limi limited li	rered office an npany, it is he ted liability co ability compar Dever Pri	In the business office of the registered ereby confirmed that the change(s) company or as otherwise provided in ny.
	Date of filing/registration in Florida Joseph Schwantes Registered Agent and Registered Office shown on the records of 6750 NE 4th Ct Registered Office Address (MUST BE FLORIDA STREET) Miami	Date of filing/registration in Florida 4. Joseph Schwantes Registered Agent and Registered Office shown on the records of the Florida 6750 NE 4th Ct Registered Office Address Miami	Date of filing/registration in Florida 4. Dot Joseph Schwantes Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 6750 NE 4th Ct Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Miami , FL Miami , FL 33138 Chen Nagid Enter name of NEW Registered Agent and/or NEW Registered Office address: 1750 NW 107th Ave NEW Registered Office Address: Sweetwater , FL 33172 mited liability company is not organized under the laws of the State of Florid go or changes are made, the Florida street address of the registered office and flore and flore address of the state of Florid go or changes are made, the Florida street address of the limited liability company, it is he authorized by an affirmative vote of the members of the limited liability company

Signature of Registered Agent

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