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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
	SALÜTÉLILLÖ			
Snrie	CET: The was to the first of the second section bears.  Nam	ne of Limited	l Liability Company	
Dear Si	r or Madam:			
The end	closed Registered Agent/Registered Off	ice Change a	and fec(s) are submitted for fi	iling.
	return all correspondence concerning th	_		J
i icase i	return an correspondence concerning in	is marror to t	ne tottowing.	
Ms. Ti	ina Rodriguez			
<u></u>	Name of Person			
Harpe	r Meyer LLP			
<del>.</del>	Firm/Company		<del></del>	
Miami	Center - Suite 800, 201 S. Bisca	yne Blvd.		SECR TALLY
	Address			E S
Miami	, FL 33131:			ILED FARY OF S MASSEE, FI
	City/State and Zip Code			STAT STAT
arabey	y@gmail.com			DE 8
E-	-mail address: (to be used for future ann	ual report no	otification)	
For furt	ther information concerning this matter,	please call:		
Ms. Ti	na Rodriguez	305	577-3443	
•	Name of Person		Arca Code & Daytime 7	Felephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	·	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Tallahassee, Florida 32301			

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

■ \$25 Filing Fee

■ \$55 Fi

## 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

I. Na	ame of the limited liability company: SALUTEL LLC	<u>;</u>		
2. (a)	10101 Collins Avenue	(b) 10101 Collins Avenue		
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Apt. 14D		Apt. 140	)
	Bal Harbour, FL 33154	_	Bal Harb	oour, FL 33154
	March 22, 2016		L1600005	58472
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	George R. Harper, Esq.			
J. ( <del></del> )	Registered Agent and Registered Office shown on the records of the	e Floric	la Dept. of State	- e:
	Miami Center - Suite 800			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	-
	201 S. Biscayne Blvd.			<b>₩</b>
	Miami , FL	33131		ECRET F
(b)	Alexander Rabey			FILED III 19 PA ETARY OF HASSEE, I
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	ddress:	- الله الله الله الله الله الله الله الل
	10101 Collins Avenue - Apt. 14D			3.5g. ORID/
	NEW Registered Office Address:			
	Bal Harbour , FL 3	33154		-
the cha agent v was/wo	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liabers.	he regoility of the linited	istered office company, it is nited liabilit	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany.
Signal	tive of a person or authorized representative of a member			Printed or typed name of signee
provisi the obl to nigre	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had it in writing of this change.	erforn	nance of mv	duties, and I am familiar with and accept

INHS18 (2/14)

Signature of Registered Agent

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