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## COVER LETTER

Programme : Division of Corporations
SUBJECT: Marinero 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:
Andrew M. Smulian Name of Person
Firm/Company
88 SW7th St Apt 2105
Midmi FL 33130 City/State and Zip Code
andrew. Smuliana kerman. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrew M. Smulian at (305) 982-5613  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Cloft 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:
Specifical 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.

Florida	
1. Nai	me of the limited liability company:
2. (a) S	185W745+ Apt 2105 Miami FL 33130 (b) 88 SW 745+ Apt 2105 Miami FL 33130
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
<i>~</i>	
	01/12/17
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Andrew M. Smulian
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
(b) .	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  270 MOVINEY O COUNT  COLD GOLDS  FL 33143  FLANKEY M. STANKEY  Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Office Address:
	88 SW 75 St., Apt 2105
	Midmi .FL 33130
the charagent was/we the articles Signate I hereb provision the oblisto mere	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after age or changes are made, the Florida street address of the registered office and the business office of the registered rill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization of the operating agreement of the limited liability company.  Printed or typed name of signee  The appointment as registered agent and agree to act in this capacity. I further agree to comply with the specific position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in writing of this change.