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## COVER LETTER

TO: Registration Section Division of Corporations		•
Serrano Products LLC		
Nam	ie of Limited	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ice Change a	and fee(s) are submitted for filing.
Please return all correspondence concerning thi	is matter to	the following:
Fernando Delgado		
Name of Person	<del></del>	<del></del>
Serrano Products LLC		
Firm/Company		<del></del>
1033 SW 113th Way		
Address		<del></del>
Pembroke Pines, FL 33025		
City/State and Zip Code		<del></del>
fernando.a.delgado@gmail.com		
E-mail address: (to be used for future ann	ual report n	otification)
For further information concerning this matter,	please call:	
Fernando Delgado	650	, 6600529
Name of Person	(	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations	Division of Corporations	
Clifton Building		P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314
Enclosed is a check for the following	amount:	
<b>☑</b> \$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.

,	me of the limited liability company: Serrano Proc	ucis LL		
(a)	Fernando Delgado	(b	Fernand	do Delgado
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1033 SW 113th Way		1033 SV	V 113th Way
	Pembroke Pines, FL 33025		Pembro	ke Pines, FL 33025
	April 27, 2016		L160000	33368
	Date of filing/registration in Florida	4.		Document number
(a)	Efrain Lamas			
(**)	Registered Agent and Registered Office shown on the records of	the Florida	Dept, of Stat	- e:
	Efrain Lamas			_
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	
	6267 NW 190 Terrace			
	Miami	33015		MOV 28
(b)	Fernando Delgado			28 M 8
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	dress:	
	Fernando Delgado			₹···
	NEW Registered Office Address:			-
	1033 SW 113th Way		=	-
	Pembroke Pines . FI	33025		
cha nt w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registiability economics of the limited l	stered offic ompany, it i lited liabilit	e and the business office of the registere is hereby confirmed that the change(s) y company or as otherwise provided in appany.

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**FILING FEE: \$25.00** 

notified in scritti

Signature of Registered Agent