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SECRETARY OF STATE

J. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJECT: VirtualWorld Only, LLC								
	Name of Limited Liability Company							
Dear S	Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please	return all correspondence concerning th	is matter to the fo	llowing:					
Rand	y Guerra Benitez							
	Name of Person		-					
Virtua	alWorld Only, LLC							
	Firm/Company	· · · · · · · · · · · · · · · · · · ·	•					
4449	NW 113 TER							
	Address							
Coral	Springs, FL 33065							
	City/State and Zip Code		-					
maria	dc_em@yahoo.es							
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Rand	y Guerra Benitez	754 at (4652243					
	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	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314					
Enclosed is a check for the following amount:								
	\$25 Filing Fee		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.

1. Na	ame of the limited liability company: VirtualWorld O	nly, Ll	_C				
2. (a)	4449 NW 113 TER. Coral Springs FL 33065	(b	4449 NV	<i>N</i> 113 TER	. Coral	Sprii	ngs FL 330
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (0		Mailing address of (Note: MAY I		-	
3.	5/2/2016 Date of filing/registration in Florida	- 4.	L1600008	36109 Document no	ımber		
5. (a)	UNITED STATES CORPORATION AGENTS	, INC.					
	Registered Agent and Registered Office shown on the records of the Registered Office Address 13302 WINDING OAKS COURT SUITE A						
	TAMPA ,FL3	33612		•			
(b)	Randy Guerra Benitez Enter name of NEW Registered Agent and/or NEW Registered O	Office add	dress:	-	SECRE LAND	16 JUL -5	d E consum con consum consum consum consum consum consum consum consum consum c
•	NEW Registered Office Address:	• •		-	김유	70	
	4449 NW 113 TER			_	F STATE FLORID		[]
	Coral Springs , FL	33065		_	VIDA	90	
the cha agent v was/w	imited liability company is not organized under the lawsing 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 icles of organization or the operating agreement of the liabers.	he regist bility co the lim mited l	stered office ompany, it is lited liability	e and the busi is hereby conf y company or npany.	ness off irmed th	ice of at the	the registered change(s)
Signa	ture of a member or authorized representative of a member			Printed or type	d name of	signee	
provisi the obl to mer notifie	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he in writing of this change.	e to act erform for in (ereby co	in this cape ance of my e Chapter 605 onfirm that i	acity. I furthe duties, and I c i, F.S. Or, if i the limited lid	er agree am famil this doct ability co	to cor liar wi ument ompan	nply with the ith and accept is being filed sy has been
Signatu	re of Registered Agent						
Λ	Division of Cornerations P.O. Ro	v 6322	Tallahae	coo FI 3231	4		

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

INHS18 (2/14)