46000130814

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone	(*)			
PICK-UP WAIT	MAIL			
(Business Entity Name	?)			
(Document Number)				
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	SD BRICE	KELL 10 I	ENTERPRISE, LLC		
SCDJECT:	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/	Registered Offic	e Change	and fee(s) are submitted for filing		
Please return all correspondence	concerning this	s matter to	the following:		
ADRIANA LANCHEROS					
Name o	f Person				
Firm(C)	ompany				
134 SOUTH DIXIE HIGHV		16			
Addre					
HALLANDALE BEACH, FL	_ 33009				
City/State a	ind Zip Code	•	<u> </u>		
alancheros@yahoo.com					
E-mail address: (to be used	l for future annu	al report n	otification)		
For further information concern	ing this matter,	olease call			
ADRIANA LANCHEROS		305	8482584		
Name of Person	· · · · · · · · · · · · · · · · · · ·	·- ·· · · <u>-</u>	Area Code & Daytime Telephon	e Number	
STREET/COURIER A	ADDRESS:		MAILING ADDRESS:		
Registration Section		Registration Section			
Division of Corporation	S	Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Center (Tallahassee, Florida 321			Tallahassee, Florida 32314		
Enclosed is a check for	the following	amount:			
24 \$25 Filing Fee		9	\$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.

1. Name of the limited liability company: SD BRICKELL 10	ENTERPRISE, LLC	
2. (a) 1010 SW 2nd Ave	(b) <u>1010 SW 2nd Ave</u>	
Principal office address of limited liability company:	Mailing address of limited liability company:	
(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BO)	<u>X</u>)
Apt. 1105	<u>Apt. 1105</u>	
MIAMI, FL 33130	MIAMI, FL 33130	
07/11/2016	L16000130814	
3. Date of filing/registration in Florida	4. Document number	
5. (a) LAW FIRM OF RUBIO & ASSOCIATES, PA Registered Agent and Registered Office shown on the records of	of the Florida Dept. of States	
8950 SW 74 CT	or the Children Constitute,	
Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	
# 1804	_	-173
<u>MIAMI, FL 33156</u>	- CRET	
	METARY OF STATE AHASSEE, FLORIDA	TILED
b) <u>ADRIANA LANCHEROS</u>		m
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	office address:	çum-viğ
	mice address:	
134 SOUTH DIXIE HIGHWAY		
NEW Registered Office Address:		
SUITE 216		
HALLANDALE BEACH, FL 33009		
If the limited liability company is not organized under the laws of change or changes are made, the Florida street address of the reg will be identical. Or, in the case of a Florida limited liability cor authorized by an affirmative vote of the members of the limited organization or the operating agreement of the limited liability of	gistered office and the business office of the registere impany, it is hereby confirmed that the change(s) was liability company or as otherwise provided in the arti	ed agent s/were icles of
Signature of a member of authorized representative of a member	Printed or typed name of signee	
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfobligations of my position as registered agent as provided for in merely reflect a change in the registered office address. I hereby in writing of this change	formance of my duties, and I am familiar with and ac Chapter 605, F.S. Or, if this document is being filed	ccept the I to

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