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(Requestor's Name)
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EXAMINER

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 20, 2018

MARIBEL ACOSTA 1651 SW 44TH TERRACE FORT LAUDERDALE, FL 33317

SUBJECT: MANA & NJA LLC Ref. Number: L16000131768

We have received your document for MANA & NJA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pleas complete #5a of application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 318A00012857

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COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Division of Corporations	
MANA & NJA LLC	
	f 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 m	atter to the following:
MARIBEL ACOSTA	
Name of Person	
Firm/Company	
1651 SW 44TH TERRACE	
Address	
FORT LAUDERDALE FL 33317	` :
City/State and Zip Code	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
MARIBEL ACOSTA	754 2071493
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
☑ \$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.

1. N	ame of the limited liability company: MANA & NJA L	_LC				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)				
	(Note: MOST DE STREET AUDRESS)		(Note: MAI BE P	<u>OST OFF</u>		<u>A</u>)
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	07/13/2016 Date of illing/registration in Florida	L160001			<u>-ن</u>	·
3.	Date of illing/registration in Florida	4.	Document numb	er	гò	1
5. (a)	Maribel Acosta			3		
	Registered Agent and Registered Office shown on the records of the	: Florida Dept. of Sta	ite:	-		
	1651 SW 44th Terrace		_			
	Registered Office Address (MUST BE FLORIDA STREET AD					
	Fort laudordate Fl 3	3317	_			
	, FL			:	201	
		·	_) A 8	ت.
(b)			_	2.71-)G 2	
	Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:		25.	Õ	i
	ROBERTO ACOSTA			- 1,7	# ::	•
	NEW Registered Office Address:	 -	_			
	1651 SW 44TH TERRACE				9	_
	- Indiana in the second of the		_			4 9
	FORT LAUDERDALE. 3	3317~				-
If the li	mited liability company is not organized under the laws nge or changes are made, the Florida street address of th	of the State of F	lorida, it is hereby	confirme	ed that a	ilter
agent v	fill be identical. Or, in the case of a Florida limited liabi	ility company, it	is bereby confirme	d that the	e chano	e(s)
was/we the arti	re authorized by an affirmative vote of the members of teles of organization of the dperating agreement of the lir	he limited liabili nited liability coi	ty company or as o mpany.	therwise	provid	ed in
	N Rubel Serta	MARIBEL A				
Signat	ure of a member or authorized representative of a member		Printed or typed nam	e of signe	e	
Theret provisi	oy accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete ne	to act in this cap	pacity. I further ag	ree to co	mply w	ith the
the obli	ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided for the reflect a change in the registered office address, I her	or in Chapter 60. Sehv confirm that	5, F.S. Or, if this a	ocument	un and is beir	i accepi ig filed
notified	in writing withis change.	соў сопунт та	те итива наощ	y compai	ny nas	oven
Signator	e of Registered Agent					