

L16000145517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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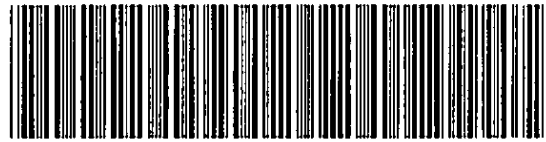
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

May 20, 2021

ROGERIO FILHO
8195 NW 71 ST
MIAMI, FL 33166

SUBJECT: ECOMIX USA LLC
Ref. Number: L16000132079

We have received your document for ECOMIX USA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 721A00010676

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EEOMIX USA 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:

ROGERIO VIEIRA FILHO

Name of Person

EEOMIX USA LLC

Firm/Company

8195 NW 71ST ST

Address

MIAMI, FL 33166

City/State and Zip Code

RVIEIRA@EINSTONE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROGERIO VIEIRA FILHO at (786) 828-9950

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$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. Name of the limited liability company: ECONIX USA LLC

2. (a) 8195 NW 71 ST, MIAMI, FL 33166 (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

3. 05/29/2021 Date of filing/registration in Florida 4. L16000132079 Document number

5. (a) CIO MANAGEMENT LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1395 BRICKELL AVE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 650 / RESIGNED
MIAMI, FL 33131

(b) ROBERTO VIEIRA FILHO
Enter name of NEW Registered Agent and/or NEW Registered Office address:

8195 NW 71 ST ST, MIAMI
NEW Registered Office Address:

_____, FL 33166

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

ROBERTO VIEIRA FILHO/MANAGER
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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