

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC
 Account Number : I20120000052
 Phone : (305)591-9180
 Fax Number : (305)591-9167

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: JNfc@jelenaccounting.com

FILED
 SECRETARY OF FLORIDA
 TALLAHASSEE, FLORIDA
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CORPORACION MLK, LLC

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MAR 29 2017

S. YOUNG

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Help

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: CORPORACION MLK LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

10560 NW 63 TERRACE

DORAL FL 33178

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

10560 NW 63 TERRACE

DORAL FL 33178

08/08/2016

L16000148233

3. Date of filing/registration in Florida

4. Document number

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

RODRIGUEZ OCTAVIO J

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

31 SE 5TH STREET. APT 301

MIAMI, FL 33131

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

LAPADULA MICHELLE ANETTA

NEW Registered Office Address:

10560 NW 63 TERRACE

DORAL, FL 33178

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 of a member or authorized representative of a member

Printed or typed name of signer

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 of Registered Agent

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

STATE OF FLORIDA
TALLAHASSEE, FL 32314
MAR 28 AM 8:20