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(Re	equestor's Name)	
(Ad	ldress)	-
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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2016 DEC 19 PM & 47

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COVER LETTER

TO:

TO: Registration Section Division of Corporations	
Imperial Reptiles & Exotics, L	LC
	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	matter to the following:
Alejandro J Estrada	
Name of Person	
Imperial Reptiles & Exotics, LLC	
Firm/Company	
3955 SW 137th Ave, Suite 4	
Address	
Miami, FL 33175	
City/State and Zip Code	
ImperialReptilesMiami@gmail.com	
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, p	blease call:
Alejandro J Estrada	305 713-5524 at (
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 a	amount:
■ \$25 Filing Fee	☐ \$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.

a) _	Principal office address of limited liability company:	(b)	3955 S	W 137th Ave, Suite 4
	Principal office address of limited liability company		-	
	(Note: MUST BE STREET ADDRESS)	_	Miami,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) FL 33175
	09/02/2016		_160001	65477
	Date of filing/registration in Florida Alejandro J Estrada	4.		Document number
a)	Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET AD 16530 SW 137th Ave. #1134	DDRESS)		_
	Miami 3	3177		2016 CE TALLA
				HAS C
)) ₋	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	ress:	FILED 2016 DEC 19 PM UP 47 SECRETARY OF STATE FALLAHASSEE, FLORID
	NEW Registered Office Address:			-
	3955 SW 137th Ave, Suite 4			<u>.</u>
	Miami 3	33175		
ha t w we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of tivil be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cless of organization or the operating agreement of the limited liability.	he regis pility co the limi imited li	tered officempany, it	ce and the business office of the registe is hereby confirmed that the change(s) ity company or as otherwise provided i
nat	ure of a member or authorized representative of a member			Printed or typed name of signee
ret	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he	e to act performa for in C	in this ca ince of my hapter 60	spacity. I further agree to comply with y duties, and I am familiar with and act of the first space of the sp