

L16 000 189467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

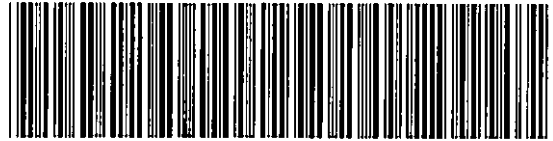
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 28, 2019

FERNANDO GARCIA  
2600 DOUGLAS RD STE 902  
CORAL GABLES, FL 33134

SUBJECT: PENA, GARCIA & DIZ PLLC  
Ref. Number: L16000189467

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

The registered agent must sign accepting the designation.

Fernando Garcia needs to sign the document as manager.

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.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 419A00022226

2019 Nov 12

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pena Garcia & Diz PLLC

\_\_\_\_\_  
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:

Fernando Garcia

\_\_\_\_\_  
Name of Person

Pena Garcia & Diz

\_\_\_\_\_  
Firm/Company

2600 Douglas Road, Suite 902

\_\_\_\_\_  
Address

Coral Gables, FL 33134

\_\_\_\_\_  
City/State and Zip Code

fgarcia@pgdlegal.com

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

For further information concerning this matter, please call:

Fernando Garcia

at ( 786 )

361-4950

\_\_\_\_\_  
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 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: Pena, Garcia & Diz PLLC
2. (a) 2600 Douglas Road  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Suite 902  
Coral Gables, FL 33134
- (b) 2600 Douglas Road  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Suite 902  
Coral Gables, FL 33134
3. 01/04/2017 Date of filing/registration in Florida
4. L16000189467 Document number
5. (a) Donald D. Wilson, Jr.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
6705 Red Road  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Suite 608  
Coral Gables, FL 33143
- (b) Fernando Garcia  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Pena Garcia & Diz PLLC  
NEW Registered Office Address:  
2600 Douglas Road, Suite 902  
Coral Gables, FL 33134

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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

Fernando Garcia

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

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00