

01/03/2019 11:42

(845) 818-3588

P 001/003

1/3/2019

L16000202301

Division of Corporations

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : Vcorp SERVICES, LLC  
Account Number : I20080000067  
Phone : (845)425-0077  
Fax Number : (845)818-3588

FILED  
19 JAN -3 AM 8:55  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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

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LLC REGISTERED AGENT CHANGE  
2631 NE 209 LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

DEC 04 2019

A. LUNT

2019 JAN -3 AM 11:56

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Help

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2631 NE 209 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:

JEMIMA ABREU

Name of Person

VCORP SERVICES

Firm/Company

25 ROBERT PITT DR, SUITE 204

Address

MONSEY, NY 10952

City/State and Zip Code

JABREU@VCORPSERVICES.COM

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

For further information concerning this matter, please call:

JEMIMA ABREU

Name of Person

at ( 845 ) 425-0077

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

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19 JAN -3 AM 8:55  
TALLAHASSEE, FLORIDA

**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: 2631 NE 209 LLC

2. (a) <u>Principal office address of limited liability company:</u> (Note: <b>MUST BE STREET ADDRESS</b> )  <u>2641 NE 209 LLC</u> <u>MIAMI, FL 33180</u>	(b) <u>Mailing address of limited liability company:</u> (Note: <b>MAY BE POST OFFICE BOX</b> )  <u>2641 NE 209 LLC</u> <u>MIAMI, FL 33180</u>
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3. <u>11/02/2016</u> Date of filing/registration in Florida	4. <u>L16000202301</u> Document number
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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
DJACQUISITIONS LLC  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
2641 NE 209TH  
MIAMI, FL 33180

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Vcorp Services, LLC  
NEW Registered Office Address:  
5011 South State Road 7, Suite 106  
Davie, FL 33314

19 JAN -3 AM 8:55  
 DEPT OF STATE  
 TALLAHASSEE, FLORIDA  
 LED

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	Mike Jarosz Printed or typed name of signee
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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