## L16000218552

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(Business Entity Name)							
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TO: **Registration Section Division of Corporations** 

SOJA MANAGEMENT SERVICES LLC Name of Limited Liability Company SUBJECT:

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:

ALDO NARCELO CIVETTA Name of Person SOTA MANAGEMENT SERVICES LLC Firm/Company 1921 NW 150 Ave Suite 103 Address Pembroke Pines FL33028 City/State and Zip Code acivetta @ soja management. com E-mail address: (to be used for future annual report notification) ALDO TI CIVETTA at (786) 585 1573 Name of Person Area Code & Daytime Telephone Number

For further information concerning this matter, please call:

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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## I 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.

Principal office address of limited liability company: (Nor: MUST BE STREET ADDRESS)       Mailing address of limited liability company: (Nor: MAY BE POST OFFICE BOX)         KEY BISCAYWE FL33149       12/02/2016       L16000218552         Date of filing/registration in Florida       4.       Document number         ALDO CIVETTA       ALDO CIVETTA       Registered Agent and Registered Office shown on the records of the Florida Dept. of State:         350 PALAWOGO LW       FIG. 33149       Iff. 33149         (h) ALDO MARCELO CIVETTA       Iff. 33149       Iff. 33149         (h) ALDO MARCELO CIVETTA       Iff. 33149       Iff. 33149         (h) ALDO MARCELO CIVETTA       Iff. 330028       Iff. 330028         Finer name of NEW Registered Agent and/or NEW Registered Office address:       Iff. 33028       Iff. 33028         The limited liability company is not organized under the laws of the Store of Florida. it is hereby confirmed that the changed example or as otherwise of the Florida street address of the registered Office address of the registered office and the business office of the registered liability company or as otherwise provided he articles of organized under the laws of the Store of a Florida. it is hereby confirmed that the changed exerce and the registered office and the business office of the registered here of the registered office and the business office of the registered here of the registered office and the business office of the registered here of the registered office and the business office of the registered here of the registered office and the business office of the registered of		me of the limited liability company: <u>50JA 17AN</u> 104 CRANDON BLVP SUITE 400	JAG <u>E71</u> 6 _ (b) _	
$\frac{12/c2/2016}{Date of filing/registration in Florida } 4. Document number \\ ALDO CIVETTA Registered Agent and Registered Office shown on the records of the Florida Dept. of State: \frac{350}{350} PALrt WCO D LN Registered Office Address INUST BE FLORIDA STREET ADDRESSHET BISCATWE(b) ALDO HARCELO CIVETTAFinter name of NEW Registered Agent and/or NEW Registered Office addressIQ21 NW ISO Ave Suite 103NEW Registered Office AddressPEA BROKE PINESFI. 33028The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office address of the registered and by antimative vote of the members of the limited liability company, or as otherwise provided the articles of organized ment of the limited liability company.$		,		
(a) <u>ALDO CIVETTA</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>350 PALM WOOD LN</u> Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u> <u>RET BISCA TWE</u> FL.33149 (b) <u>ALDO MARCELO CIVETTA</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>1921 NW ISO AVE Suite 103</u> <u>NEW Registered Office Address</u> : <u>PER BROKE PINES</u> 		KEY BISCAYWE FL33149		
(a) <u>ALDO CIVETTA</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>3.50 PALM WOOD LN</u> Registered Office Address ( <u>MUST BE FLORIDA STREET ADDRESS)</u> <u>BET BISCATWE</u> <u>FL 33149</u> (b) <u>ALDO MARCELO CIVETTA</u> Enter name of <u>NEW Registered Agent and/or NEW Registered Office address</u> : <u>1921 NW ISO AVE Suite 103</u> <u>NEW Registered Office Address</u> : <u>PER BROKE PINES</u> 		12/02/2016		
(b)       Registered Office shown on the records of the Florida Dept. of State:         350       PALM W000 LN         Registered Office Address       (MUST BE FLORIDA STREET ADDRESS)         PIET       BISCA YWE		Date of filing/registration in Florida	4.	Document number
3.50 PALM WOOD LN         Registered Office Address         MET BISCATWE         .FL_33149         (b) ALDO MARCELO CIVETTA         Enter name of NEW Registered Agent and/or NEW Registered Office address:         1921 NW 150 Ave         Suff PALMORE PINES         .FL_33028	. (a)			
Registered Office Address       (MUST BE FLORIDA STREET ADDRESS)         HEY BISCAYWE		Registered Agent and Registered Office shown on the records of th	ie Florida De	ept. of State:
HEY BISCAYNE       FI. 33149         (b)       ALDO MARCELO CIVETTA         Enter name of NEW Registered Agent and/or NEW Registered Office address:         1921 NW 150 Ave 501k 103         NEW Registered Office Address:         PEA BROKE PINES		350 PALMWOOD LN		<b></b>
1921 NW 150 Ave 501 te 103 <u>NEW</u> Registered Office Address: <u>PEA BROKE PINES</u> .FL 33028         F the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(sas/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided the articles of organization or the operating genement of the limited liability company.		Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS)</u>	
1921 NW       150 Ave       501 He       103         NEW Registered Office Address:		REY BISCAYNE		
1921 NW 150 Ave 501 te 103 <u>NEW</u> Registered Office Address: <u>PEA BRCKE PINES</u> .FL 33028         f the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(seas/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided the articles of organization or the operating genement of the limited liability company.		, FL_	33149	ASSEE
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<u>1971 NW 150 AV2 501 K 103</u> <u>NEW</u> Registered Office Address: <u>PEA BRCKE PINES</u> .FL <u>33028</u> 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 regist gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s as/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided the articles of organization or the operating recement of the limited liability company.			Office addres	
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		Milo hiettal.		ALDU A. CIVETTA 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 the change.

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notified in writing	of the change		• •		
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Signature of Registere					
organitare or rightenere		$\mathcal{V}$			
		v			

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