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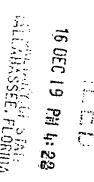
| (Address) |
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| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: Robalo Investments | |
| 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: | |
| John Impellizeri Name of Person | |
| Robalo Investments Firm/Company | |
| 1504 S- SURF Rd. SUITE 32 Address | |
| Hollywood F1- 33019 City/State and Zip Code | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Janu Impellizer at (954) 588-8157 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 & 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.

| I. Na | me of the limited liability company: Robalo Investments |
|--|---|
| 2. (a) | 1504 South Surf Rd. 32 (v) 1504 South Surf Rd. 36 Principal office address of limited liability company: Mailing address of limited liability company: |
| | Hollywood, F1. 33019 Hollywood, F1. 33019 |
| | 12/5/2016 |
| 3. | Date of filing/registration in Florida 4. Document number |
| 5. (a) | UNITED STATES CORP. AGENTS, INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 13302 WINDING OAK COURT A |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) |
| | TAMPA, FL. 33612 |
| | ,FL |
| (b) | John Tracellizer |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: 1504 South Surf Road 32 NEW Registered Office Address: |
| | |
| | Hollywood FL 33019 |
| the cha agent v was/we | mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge 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(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cless of organization or the operating agreement of the limited liability company. |
| Signat | Type of a member or authorized representative of a member Printed or typed name of signee |
| I herei provisi the obl to mere notified | by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the caps of all statutes relative to the proper and complete performance of my chities, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been if it writing of this change. |
| | Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00 |