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O SIMMONS

COVER LETTER

TO: Registration Section Division of Corporations						
92nd Street Invesments. LLC SUBJECT:						
Name of Li	mited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	er to the following:					
Henry Dow						
Name of Person						
92nd Street Investments, LLC						
Firm/Company						
555 NW 95 Street						
Address						
Miami FL 33150						
City/State and Zip Code						
cmejia@wrgfla.com						
E-mail address: (to be used for future annual repo	ort notification)					
For further information concerning this matter, please	call:					
Catalina Mejia	4908980					
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					

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.

1. N	ame of the limited liability company: 92nd Street In					
2. (a)	555 NW 95 ST. Miami FL 33150	_(b) 555 NW 95 ST. Miami FL 33150				
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3.	12/09/2016 Date of filing/registration in Florida Henry Dow	4.	L1600022	23238 Document number		
5. (a)	Registered Agent and Registered Office shown on the records of the 555 NW 95 ST MIAMI FL 33150	ne Florid	a Dept. of Stat	- e:		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u> </u>	- -	16 DEC 19 AM II: 00	··· T
	, FL	<u> </u>		_	10F 2	and properties
(b)	Nicolas Velez (Please Inclu	de	new f	Person).		П
(0)	Enter name of NEW Registered Agent and/or NEW Registered (Office ad	dress:	-	AM II: 00	
	555 NW 95 ST. Miami FL 33150				्र _स	
	NEW Registered Office Address:			-		
				-		
	, FL_			_		
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	the regi bility co f the lin	stered office ompany, it in ited liabilit	e and the business of s hereby confirmed to by company or as oth	ffice of the r that the char	egistered
	14 R	He	nry Dow		<u></u> .	
	ature of a member or authorized representative of a member			Printed or typed name	-	
provis the ob to mei	eby accept the appointment as registered agent and agre sions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	perform	ance of mv	duties, ånd I am fam	illiar with a	nd accent
Signat	ure of Registered Agent					

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