

L16000231973

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12/14/2017

Division of Corporations

Florida Department of State
Division of Corporations
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****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
SPARROW SYSTEMS, LLC

Certificate of Status	0
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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: Sparrow Systems, LLC
2. (a) 5608 NW 113th Avenue
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Doral, Florida 33178
- (b) 5608 NW 113th Avenue
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Doral, Florida 33178
- 12/27/2016
Date of filing/registration in Florida
- L16000231973
Document number

3. Eduardo R. Arista, ESQ
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Arista Law & Tax
Registered Office Address: (Note: **MUST BE FLORIDA STREET ADDRESS**)
1401 Brickell Avenue Ste 500
Miami, FL 33131

- (b) Maria Echeverry Castro
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Tidal Management, LLC
NEW Registered Office Address:
5608 NW 113th Avenue

Doral, FL 33178

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.

Maria Echeverry Castro
Signature of a member or authorized representative of a member

Maria Echeverry Castro
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.

Maria Echeverry Castro
Signature of Registered Agent

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

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