

L17000027826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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MAR 22 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2017

ANDRES HOLLMANN  
1701 SUNSET HARBOUR DR, PH 706  
MIAMI BEACH, FL 33139

SUBJECT: HOLLMANN ARCHITECTURE, LLC  
Ref. Number: L17000027826

We have received your document for HOLLMANN ARCHITECTURE, LLC and your check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

PLEASE FILL OUT THE ENCLOSED FORM AND RETURN IT, THE OTHER FORM WAS NOT CORRECT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 617A00004271



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 16, 2017

ANDRES HOLLMANN  
1701 SUNSET HARBOUR DR, PH 706  
MIAMI BEACH, FL 33139

SUBJECT: HOLLMANN ARCHITECTURE, LLC  
Ref. Number: L17000027826

We have received your document for HOLLMANN ARCHITECTURE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 517A00003133

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HOLLMANN ARCHITECTURE 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:

ANDRES HOLLMANN

Name of Person

HOLLMANN ARCHITECTURE, LLC

Firm/Company

1701 SUNSET HARBOUR DR., PH 706

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

andreshollmann@ee-ce.net

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

For further information concerning this matter, please call:

ANDRES HOLLMANN

Name of Person

at ( 954 ) 288-4586

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

**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: HOLLMANN ARCHITECTURE, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*  
1701 SUNSET HARBOUR DR., PH 706 1701 SUNSET HARBOUR DR., PH 706  
MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

3. 06/23/2008 4. L17000027826  
Date of filing/registration in Florida Document number

5. (a) ANDRES HOLLMANN  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

HOLLMANN ARCHITECTURE LLC  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
140 S DIXIE HWY, TH 106  
HOLLYWOOD, FL 33020

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
\_\_\_\_\_  
NEW Registered Office Address:  
1701 SUNSET HARBOUR DR., PH 706  
MIAMI BEACH, FL 33139

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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  
ANDRES HOLLMANN  
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.*

\_\_\_\_\_  
Signature of Registered Agent