

L170000 44292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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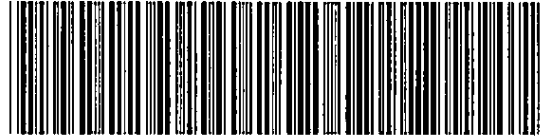
(Business Entity Name)

(Document Number)

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R. WHITE

NOV 18 2019

Division of Corporations

**SUBJECT:** NOVEK 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:

Angel A. Suarez

*Name of Person*

Firm/Company

9280 SW 21 Street

*Address*

Miami, FL 33165

*City/State and Zip Code*

two8080@aol.com

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

For further information concerning this matter, please call:

Angel A. Suarez

at ( 786 )

269-7867

*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

Florida. The following statement in order to change its registered office or registered agent, or both, in the State of Florida, pursuant to Florida statutes, the undersigned limited liability company,

1. Name of the limited liability company: NOVEK LLC

2. (a) 9280 SW 21 Street (b) same

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Miami, FL 33165

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

2/28/17

3. Date of filing/registration in Florida

L17000044292

4. Document number

5. (a) Luis A. Pallares

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3900 NW 79 Ave. Suite 330

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Miami, FL 33166

FL

(b) Angel A. Suarez

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

9280 SW 21 Street

**NEW** Registered Office Address:

Miami, FL 33165

FL

2019/02/15 AM 11:57

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]  
Signature of a member or authorized representative of a member

S Novak  
Printed or typed name of signer

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]  
Signature of Registered Agent

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