## L1700005455/

	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UF	P WAIT MAIL				
	(Business Entity Name)				
(Document Number)					
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## **COVER LETTER**

INHS18 (2/14)

	egistration Section ivision of Corporations							
SUBJECT	The Monarch Investmen Gro	up, IIc						
Name of Limited Liability Company								
Dear Sir o	r Madam:							
The enclos	sed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.						
Please retu	arn all correspondence concerning this	matter to the following:						
Marino F	Pena							
276×17	Name of Person							
The Mor	narch Investmen Group, LLC							
	Firm/Company							
274 Wills	shire Blvd, Suite 249							
	Address							
Casselb	erry, FL 32707							
	City/State and Zip Code							
marino@	themonarchgroup.org							
E-ma	il address: (to be used for future annua	al report notification)						
For further	information concerning this matter, p	lease call:						
Marino P	'ena	at () 405-3713						
	Name of Person	Area Code & Daytime Telephone Number						
Re Di Cli 26	GREET/COURIER ADDRESS: gistration Section vision of Corporations ifton Building 61 Executive Center Circle llahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
	closed is a check for the following a	mount:						
	\$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. Na	ame of the limited liability company: The Monarch	Investr	nen Group	), LLC 	
2. (a)	Marino Pena	(b) Lisandro Jorge			
2. (4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	274 Wilshire Blvd, Ste 249		274 Wilsh	hire Blvd, Ste 2	249
	Casselberry, FL 32707	Casselberry, FL 32707			
	3/8/17	_	_1700005	4551	
3.	Date of filing/registration in Florida	4.	I	Document numbe	er .
5. (a)	Lisandro Jorge				
· (w)	Registered Agent and Registered Office shown on the records of the , FL 32707	e Florida	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	<u>.</u>		
	274 Wilshire Blvd, Ste 249				20
	Casselberry , FL	32707			2017 APR SECRET
(b)	Marino Pena				12 SS 12
` ` `	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:		THE PO
	274 Wilshire Blvd,				2: 28 2: 28 S [Min
	NEW Registered Office Address:				and the Carlo
	Suite 249				
	Casselberry , FL 3	32707			
the cha agent v was/we the arti	imited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liability of a member or authorized representative of a member by accept the appointment as registered agent and agree	he regist bility con the limi mited li	ered office annually it is little ted liability ability comp	and the business hereby confirmed company or as of bany.  Printed or typed name	office of the registered d that the change(s) therwise provided in the of signee
provisi the obl. to mere notified	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	erforma for in C ereby co	nce of mỹ di hapter 605, nfirm that th	ıties, änd I am fa F.S. Or, if this d ve limited liability	miliar with and accept locument is being filed y company has been
	re of Registered Agent				