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11/14/17--01019--004 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ARTEURO Studios Ent'L LLd- 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:
Autowio Rogina Name of Person
Arteuro Studios Int'I LLC Firm/Company
2475 NW 14CtRd Apt 201 Address
Minmi H 33125 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Antonio Rogista at (214) 886 3996 Name of Person at (214) 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:

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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	lame of the limited liability company: APTEURO STUDIOS FNT'L LLC	
2. (a)		<u>.</u>
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	19290 Collins Are Not 1008 SAME	
	(1370 CO (17NB) (100B) STITLE	
	Junny Istes Deacht IL	
	3/22/17 33160 65749	
3.	Date of filing/registration in Florida 4. Document number	
5. (a	Ddd14 TADIA	
(,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	19390 Collins the	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Suny Tes Grade RI ApT1008	
		:
	Sunny Isles Beacher 33160 SE TO	
(b)	Antonio Roslak	
(-/	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	2475 NW 165+1Rd.	
	NEW Registered Office Address:	
	U jamí	
	FI 33125	
	, 1 b	
the ch agent was/w	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after hange or changes are made, the Florida street address of the registered office and the business office of the regist will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change (see authorized by an affirmative vote of the members of the limited liability company or as otherwise provided	ered)
the af	ficles of organization or the operating agreement of the limited liability company.	, `
<u> </u>	nature of a member Antonio Logiz - Og Printed or typed name of signee	101 H
•		L.a
provis the ob- to me	eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a bligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being rely reflect a change in the registered office address, I hereby confirm that the limited liability company has be ed in writing of this change.	ine ecept filed en

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

Signature of Registered Agent