

L170000 70686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

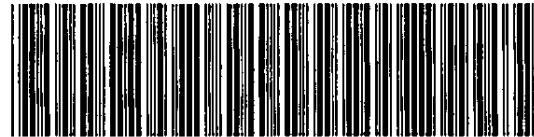
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Quba 2017, 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:

Ruslan Ilyagiev

\_\_\_\_\_  
Name of Person

Quba 2017, LLC

\_\_\_\_\_  
Firm/Company

19390 Collins Ave., Unit PH-11

\_\_\_\_\_  
Address

Sunny Isles Beach, FL 33160

\_\_\_\_\_  
City/State and Zip Code

adam130780@gmail.com

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

For further information concerning this matter, please call:

Ruslan Ilyagiev

at ( 786 ) 449-1319

\_\_\_\_\_  
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

**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: Quba 2017, LLC

2. (a) 19390 Collins Avenue

Principal office address of limited liability company:

*(Note: MUST BE STREET ADDRESS)*

Unit PH-11

Sunny Isles Beach, FL 33160

03/28/2017

3. Date of filing/registration in Florida

(b) 19390 Collins Avenue

Mailing address of limited liability company:

*(Note: MAY BE POST OFFICE BOX)*

Unit PH-11

Sunny Isles Beach, FL 33160

L17000070686

4. Document number

5. (a) JURADO, ROMY B

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

12955 BISCAYNE BOULEVARD

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

SUITE 328

NORTH MIAMI, FL 33181

(b) ILYAGUEV, RUSLAN G

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

19390 COLLINS AVENUE

NEW Registered Office Address:

UNIT PH-11

SUNNY ISLES BEACH, FL 33160

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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

RUSLAN ILYAGUEV

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

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00