L17000016997

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S. WARREN AUS 0 8 2017

COVER LETTER

TO:	Registration Section Division of Corporations									
4-1/15 15	SVP4U-KYIV-1-FUND LLC									
SUBJE	Name of Limited Liability Company									
Dear S	ir or Madam:									
The en	closed Registered Agent/Registered Offi	ce Change an	d fee(s) are submitted for filing.							
Please	return all correspondence concerning thi	s matter to the	e following:							
Rosti	slav Sipakov									
	Name of Person									
SVP4	ΙU									
	Firm/Company									
78 SV	W 7TH ST Suite 500									
	Address									
Miam	i, FL, 33130									
	City/State and Zip Code									
r.sipa	kov@svp4u.com									
E	-mail address: (to be used for future ann	ual report not	ification)							
For fur	ther information concerning this matter,	please call:								
Rostis	slav Sipakov	786 at (224-4023							
	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	R D P	MAILING ADDRESS: Registration Section Division of Corporations O.O. Box 6327 Callahassee, Florida 32314							
	Enclosed is a check for the following	amount:								
	☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy							
INHST	8 (2/14)		i							

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	une of the limited liability company:	-1-FUN	ND L	LC						
2. (a)	78 SW 7TH ST	a	_{b)} 78	sw	7TH S	T	•			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	``			_	address of limi		-		_
	Suite 500		St	uite 50	Ю					
	Miami, FL, 33130	_	M	iami, I	FL, 33	130				
	04/05/2017		L17	70000	76997	•				
3.	Date of filing/registration in Florida	4.			Docur	nent numbe	r			
5. (a)	SVP4U INC.									
J. (4)	Registered Agent and Registered Office shown on the records of 60 SW 13TH ST	the Florid	la Dep	t. of Stat	- c:					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							; =	17	
	4411						: : •		2	
	Miami , FL	33130)		-		· · · · · · · · · · · · · · · · · · ·	:-	7 NUG -7	FILED
(b)	Registered Agents Inc.				_		<u> </u>	,, 	PH	
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress	Į:			:-	⊇∵.	կ։ 08	
	3030 N. Rocky Point Dr.						(10)	ÉM	8	
	NEW Registered Office Address:				-					
	STE 150A				-					
	Tampa, FI	33607	7		_					
the cha agent was/w	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lifere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the reg ability of of the li	istere comp mited	ed offic any, it I liabili	e and t is here! ty com	the business by confirme pany or as o	office of that the	of the	regist	tered s)
	1/2/	Ro	stis	lav Si	pakov	_, AMB	R			
Sign	sture of a member or authorized representative of a member				Printe	d or typed nar	me of sign	icc		
provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	e pertori	nunc	e of my	·dulies	. and I am I	amiliar	with	and a	ccent
<u> </u>	are of Registered Agent									

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

INHS18 (2/14)