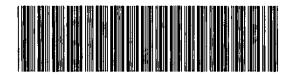
L7000081618

<u> </u>			
(Requestor's Name)			
(Address)			
(Address)			
(Addiess)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Business Entity Name)			
<u> </u>			
(Document Number)			
Certified Copies Certificates of	Status		
	1		
Special Instructions to Filing Officer:			
			

Office Use Only



000300661610

06/26/17--01022--023 **25.00

17 JUN 26 AN 9 01
SECRETARY OF STATE
OF THE ORDINA

D. SCOTT JUN 2 9 2017

COVER LETTER

TO: Registration Section Division of Corporations	•		
SUBJECT: Blu Money Records LLC			
Nan	ne of Limited	Liability Company	
Dear Sir or Madam:	•		
The enclosed Registered Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to th	he following:	
Luis Lloret			
Name of Person			
Blu Money Records LLC			
Firm/Company			
658 NW 154 Ave			
Address			
Pembroke Pines, FL 33028			
City/State and Zip Code			
luislloret97@gmail.com			TALL
E-mail address: (to be used for future ann	ual report no	tification)	題复工
For further information concerning this matter,	please call:		JUN 26 METARY OF LANASSEE.
Luis Lloret	954 at (729-1986	FST 9
Name of Person		Area Code & Daytime Teleph	ione 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	۵	\$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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	me of the limited liability company: Blu Money Red	cords LLC	
2. (a)	658 NW 154 Ave Pembroke Pines, FL 33028	_ (b)	
- . (#)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Reglia Diaz as President (Remove)		
(,	Registered Agent and Registered Office shown on the records of the 9978 NW 127 ST	e Florida Dept. o	of State:
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS)	
	HIALEAH GARDENS ,FL	33018	
(b)	Luis Lloret as New President		TALL SEC
	Enter name of NEW Registered Agent and/or NEW Registered O	Office address:	三
	658 NW 154 Ave		26 E
	NEW Registered Office Address:		
			2007
	Pembroke Pines , FL 3	33028	
the cha agent 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 and affirmative vote of the members of cess of organization or the operating agreement of the liability and an affirmative vote of the members of cess of organization or the operating agreement of the liability acceptable appointment as registered agent and agree of the appointment as registered agent and agree of the appointment as registered agent as provided in the registered office address, I he in writing of this change.	he registered of sility company the limited liability mited liability	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company. Support
Signatu	re of Repeatered Agent		