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S. YOUNG

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations						
SUBJECT: S&S CONSULTING, LLC	S&S CONSULTING, LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning t	this matter to the following:					
BRUNO SUAREZ						
Name of Person						
S&S CONSULTING						
Firm/Company						
9780 SW 147TH ST	LLA)					
Address	PEC -3					
MIAMI, FLORIDA 33176	FT1 C					
City/State and Zip Code	ELORIDA					
bsuarez@snsconsultingservices.com	D. D					
E-mail address: (to be used for future an	annual report notification)					
For further information concerning this matter	er, please call:					
BRUNO SUAREZ	305 608-5728					
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 followin	ng 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. N	lame of the limited liability company: S&S CONSU	JLTING	, LLC	
2. (a)	Principal office address of limited liability company:	(1	b)	Mailing address of limited liability company:
	(<u>Note: MUST BE STREET ADDRESS</u>)			(Note: MAY BE POST OFFICE BOX)
	9780 SW 147TH ST		9780 S	W 147TH ST
	MIAMI, FLORIDA 33176		MIAMI,	FLORIDA 33176
	04/24/2017		L170000	90235
3.	Date of filing/registration in Florida	 4.		Document number
5. (a)			
<i>.</i> (u	Registered Agent and Registered Office shown on the records of BRUNO SUAREZ	f the Florid	a Dept. of Sta	ite:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u></u>	_
	7791 NW 46TH ST #427			المنتقد
	DORAL , FI	33166		B DEC SUCRETA
				FILED DEC -3 AM TREED AND OF A AHASSEE, FL
(b)	Enter name of NEW Registered Agent and/or NEW Registered	- Office ad	ldwaee:	-3 SSEE
	Enter hance of NEW Registered Agent and of NEW Registered	u Office ac	iuress,	
	BRUNO SUAREZ			- JANE 10
	NEW Registered Office Address:		<u>-</u> .	- Julian 10
	9780 SW 147TH ST			_
	MIAMI	33176		_
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of licks of organization or the operating agreement of the	f the regi lability co of the line limited	stered offic ompany, it nited liabili liability co	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Sion	ature of a member or authorized representative of a member	- BK	UNO SU	Printed or typed name of signee
I here provis the ob to men notifie	thy accept the appointment as registered agent and ages ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change.	ree to ac e perform ed for in hereby c	t in this cap ance of my Chapter 60 onfirm that	manite. I fouther a man to a much with the
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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00