## 117000 109971

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

Office Use Only



400325585344

03/07/19--01018--009 \*+25.00

19 MAR -7 M 4: 50

MAR 1 6 2019 S. YOUNG

## **COVER LETTER**

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations	•
DE LA IMPORTS SUBJECT:	
Na	me of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Lissette de la Torriente	
Name of Person	
DE LA IMPORTS	
Firm/Company	
5838 SW 74TH TERRACE #107	
Address	
SOUTH MIAMI, FL 33143	
City/State and Zip Code	
liz@delaimports.com	
E-mail address: (to be used for future an	nual report notification)
For further information concerning this matter	r, please call:
Lissette de la Torriente	305 510-0485
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 Englosed is a check for the followin	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the followin	
☑ \$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.

Na	une of the limited liability company:  DE LA IMPO	ORTS	
a)	5838 SW 74TH TERRACE #107	(b) 58	338 SW 74TH TERRACE #107
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	South Miami, FL 33143	Sc	outh Miami, FL 33143
	05/17/2017	 L17	<sup>2</sup> 000109971
	Date of filing/registration in Florida	4.	Document number
a)	Jorge de la Torriente		
	Registered Agent and Registered Office shown on the records 5838 SW 74TH TERRACE #107		t, of State:
	Registered Office Address (MUST BE FLORIDA STREE		14 SECOND
	South Miami	FL_33143	
)	Lissette de la Torriente		FILED Allasself
	Enter name of NEW Registered Agent and/or NEW Register	<u>ed Office address</u>	
	5838 SW 74TH TERRACE #107		50 RDA
	NEW Registered Office Address:		<del></del>
			<del></del>

the articles of organization or the operating agreement of the limited

Signature of a member or authorized representative of a member

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