

(I	Requestor's Name)	<u></u> .
(/	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:		
whom	am	
Office Use Only		



07/19/18--01008--020 **35.00





July 27, 2018

MARITZA MORALES 9723 NW 32 ST DORAL, FL 33172

Ref. Number: L1700013170

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 118A00015501

Octavia L Simmons Regulatory Specialist III

118 13 8#11:55

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Subject: Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change a	and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to t	he following:	
Miciam Quinonez Name of Person		
Yhaab LLC Firm/Company		
9723 NW 325+ Address		
Doral 21 33172 City/State and Zip Code		
E-mail address: (to be)used for future annual report no	otification)	
For further information concerning this matter, please call:		
Miriam Quitonez at 30	OST 915-5112 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:		
□ S25 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:	b LLC
2. (a) 9723 NW 325+	(b) 9723 NW 325+
Principal office address of limited liability company:	Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
M2201 75 22117	<u>DOYGI JC 55112</u>
6/15/17	L17000131700
3. Date of filing/registration in Florida	4. Document number
5. (a) Natalia Cara	
Registered Agent and Registered Office shown on the records of the	ne Florida Dept. of State:
5530 NW 113C+	ANG PI
Registered Office Address (MUST BE FLORIDA STREET A	DORESSI SEE E
Doral FI.	3317 8 1000 1000 1000 1000 1000 1000 1000 10
(b) Wiriam Quinonez Enter name of NEW Registered Agent and/or NEW Registered O	
9723 NW 395+	
NEW Registered Office Address:	
Doral	
FL_	221 (7
If the limited liability company is not organized under the law the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited lia was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the	the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) f the limited liability company or as otherwise provided in
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 provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address. The notified in writing of his charge. Signature of Registered Agent	was to get in this congrity. I further garge to comply with the