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COVER LETTER

TO: Re						
SUBJĘC"						
SUBMIC						
Dear Sir o	or Madam:					
The enclo	sed Registered Agent/Registered Offi	ice Cha	ige and	tee(s) are submitted fo	or filing.
Please reti	urn all correspondence concerning thi	is matte	r to the t	folic	owing:	
	Jaime A. Munoz					
	Name of Person			_		
	Jaime A. Munoz					
	Firm/Company					
	423 SE 33 Ter					1
	Address					
	Homestead, Fl. 33033					
	City/State and Zip Code					
	collumber@live.com					
E-m	ail address: (to be used for future ann	nal repo	ort notitī	īcati	on)	
For furthe	r information concerning this matter,	please	call:			
	Jaime A. Munoz	at {	305)	303 0772	
	Name of Person	_			rea Code & Daytin	nd Telephone Number
Registration Section Regis Division of Corporations Divis Clifton Building P.O. I				gisti visid J. H	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 3231	4
E	I					
2	S25 Filing Fee		□ \$5	55 F	iling Fee & Certifi	ed 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.

i. Na	me of the limited liability company:Jaime_Mun	oz or Co	ollumber L	lc	
	423 SE 33 Ter Homestead, Fl. 33033	(b)	423 SE 3	33 Ter Homestead	i, Fl. 33033
	Principal office address of limited flability company: (Note: MUST BE STREET ADDRESS)	_ (**		uling address of limited li (Note: MAY BE POST 6	
					
	July 20, 2017		L13	000156096	
8. 8. (a)	Date of filing/registration in Florida Jaime A Munoz Sr Sole MBR	4,	I	Document number	
. (4)	Registered Agent and Registered Office shown on the records of	the Florida (Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET). 423 SE 33 Ter	ADDRESS)			5
	Homestead, FL	33033	<u> </u>		É
(b)	Enter name of NEW Registered Agent and/or NEW Registered Jaime A Munoz	Office add	ress.		: : :
	NEW Registered Office Address:				-
	423 SE 33 Ter				57.75
	Homestead , FI	330	33		2
he cha igent was/we he arti	mited liability company is not organized under the lange or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the organization or the operating agreement of the ure of a member or authorized appreciatative of a member	f the regist ability con of the limi limited li	tered office mpany, it is ted liability	and the business offic hereby confirmed tha company or as others pany.	ee of the registered at the change(s) wise provided in
rovisi he obl o mere notifice	ov accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address of the writing of this change.	r pertorma	nce ot my d	uties 'ana f am famuli	ar with and accept
	Division of Corporations P.O. FILING F			ec. Fl. 32314	

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HS18 (2/14)