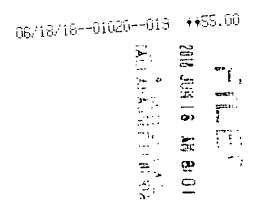
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(Re	questor's Name)			
(VC	,,			
— (Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
				
Special Instructions to Filing Officer:				





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JUN 20 MM

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Surento, L.L.C.
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ronney Belisario
Name of Person
Surento, L.L.C.
Firm/Company
7311 NW 12th Street, Suite 20
Address
Address
Miami, FL 33126
City/State and Zip Code
orlando.28diaz@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ronney Belisario 305 815-2545
Name of Person Area Code & Daytime Telephone Numbe
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301
Enclosed is a check for the following amount:
□ \$25 Filing Fee
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	une of the limited liability company: Surento, L.L.C	D		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability or (Note: MAY BE POST OFFICE	mpany:
	7311 NW 12th Street, Suite 20	_		
	Miami, FL 33126			
	08/18/2017	L1	17000177493	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
5. (a)	Registered Agent and Registered Office shown on the records of Orlando Diaz	the Florida De	kept, of State:	
	Registered Office Address (MUST BE FLORIDA STREET)	1 DDP ESSI		
	901 Brickell Key Boulevard, Suite 2506	<u>IDDKESS)</u>		
	Miami FL	33131		
			7	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	()(Consideration	ess: 5-1 - 5-2 - 5	1;
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	<u>(ss.)</u>	F 1
	Ronney Belisario			
	NEW Registered Office Address:			
	7311 NW 12th Street, Suite 20		# 0 P	
	Miami	33126		
signa A here provise the obelowner	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light of an affirmative vote of the members of icles of organization or the operating agreement of the member of a member of all statutes relative to the proper and complete digations of my position as registered agent as provided by reflect a change in the registered office address, I is difficulting of this change.	the register ability composite the limited liab Orland ree to act in performance d for in Cha	ered office and the business office of the pany, it is hereby confirmed that the ched liability company or as otherwise probility company. The printed of typed name of signee on this capacity. I further agree to compace of my duties, and I am familiar with the paper 605, F.S. Or, if this document is	e registered ange(s) ovided in by with the and accept being filed