L17 000 177640

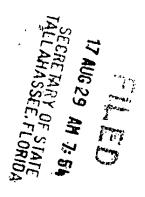
(Requestor's Name)			
(Address)			
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(Cit	ty/State/Zip/Phone	• #)	
PICK-UP	☐ WAIT	MAIL	
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COVER LETTER

Division of Corporations	
SUBJECT: MS SUN	FRESH CLEANERS
SCINECT.	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Regi	stered Office Change and fee(s) are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
MARTIN CABRERA	
Name of Per	rson
MS SUN FRESH CLEANERS	
Firm/Compa	iny
4630 S. KIRKMAN RD708	
Address	
ORLANDO, FL 32811	
City/State and Z	Cip Code
santos.ywendoline@gmail.cor	
E-mail address: (to be used for	future annual report notification)
For further information concerning t	his matter, please call:
MARTIN C. SANTOS	. 407 590-5273
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check for the	following amount:
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified 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

l. Na	me of the limited liability company: MS SUN FRE	ESH CLE	ANERS
l. (a)	4630 S. KIRKMAN RD708	(b) 4630 S. KIRKMAN RD708	
· (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32811		DRLANDO, FL 32811
	08/21/2017		L17000177640
	Date of filing/registration in Florida	4.	Document number
. (a)	MARTIN CABRERA		
	Registered Agent and Registered Office shown on the records of the 4630 S. KIRKMAN RD 708	he Florida D	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	AUG 29 AHASSE
	ORLANDO , FL	328011	TEL TO A TO
(b)	MARTIN C. SANTOS		STAT
	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	
	SAME ABOVE		
	NEW Registered Office Address:		
	SAME ABOVE		
	, FL_		
he cha gent w vas/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of a vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the registe bility com f the limite limited lial	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.
Signal	ure of a member or authorized representative of a member	MAR	Frinted or typed name of signee
I herel provision he obli o mere notifica W	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ze to act in performan! for in Chi ereby con	this canacity. I further agree to comply with the