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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

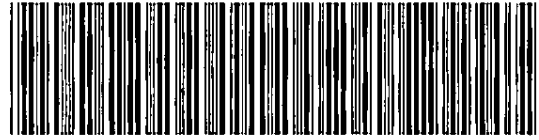
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

Antonio Cuellar Photography LLC

SUBJECT: _____
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:

Antonio Cuellar

Name of Person

Antonio Cuellar Photography

Firm/Company

1395 Brickell Ave Suite 800

Address

Miami FL 33131

City/State and Zip Code

acuellar@me.com

E-mail address: (to be used for future annual report notification) ✓

For further information concerning this matter, please call:

Antonio Cuellatr 305 4581131

Name of Person at () 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:

- \$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.

Antonio Cuellar Photography, LLC

1. Name of the limited liability company: _____

2. (a) 1341 nw 22 st (b) 1395 Brickell Ave Suite 800

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

MIAMI, FL 33142

Miami FL 33131

09/05/2017

L17000187985

3. Date of filing/registration in Florida 4. Document number

UNITED STATES CORPORATION AGENTS, INC.

5. (a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
5575 S. SEMORAN BLVD

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
Suite 36

ORLANDO 32822
FL

Antonio Cuellar

(b) _____

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1395 Brickell Ave Suite 800

NEW Registered Office Address:

Miami 33131
FL

FILED
2019 SEP -9 AM 10:40
SECRETARY OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Antonio Cuellar
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]
Signature of Registered Agent