## 117000198721

(Re	questor's Name)				
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



600304251636

10/10/17--01017--004 \*\*25.00

TO OCT 10 PH 4:48

## COVER LETTER

TO;	Registration Section Division of Corporations		
SUBJE	CT: BLI	ZZARD SYSTEHS LLC	
	Nan	me of Limited Liability Company	
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered Off	Tice Change and fee(s) are submitted for filin	g.
Please 1	return all correspondence concerning th	nis matter to the following:	
	MARIO L OJITO		
	Name of Person		•:
			٠.
	BLIZZARD SYSTEMS LLC		
	Firm/Company		
125	752 AU 00th DIATE		
	152 NW 98th PLACE Address	<del></del>	
HIALI	FAN GORDENS / FLDRIDA 33	SOIS	•
11116	EAH GARDENS / FLORIDA 33 City/State and Zip Code	<u> </u>	
		:·	
Tito	<u> Oblizzard - Suskins . Com</u> -mail address: (to be used for future and	nual report notification)	
E	-man address. (to be dised for future and	nuar report notrication)	
For fur	ther information concerning this matter	r, please call:	
			•
	MARIO LOJITO	at ( <u>305</u> <u>323 - 8831</u>	lambana Mumban
	Name of Person	Area Code & Daytime Tel	epnone Number
	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	g amount:	
	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Co	ру
INHS18	3 (2/14)		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED A'GENT 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	ame of the limited liability company: BLT22	ARD SY	STEMS LLC		_
2. (a)	12152 NW 98th PL, HIALEAH GDMS, FL, 33 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			of limited liability company: BE POST OFFICE BOX)	_
3. 5. (a)	Date of filing/registration in Florida  MARIO L OJIO	4.	W17 <b>6</b> 000766		_
J. (a)	Registered Agent and Registered Office shown on the records  12752 NW 98 <sup>TH</sup> PLACE  Registered Office Address MUST BE FLORIDA STREE		Dept. of State:		
(b)	HIALEAH GARDENS  MARIO L OJITO  Enter name of NEW Registered Agent and/or NEW Registered			DIVISION OF BUNGBER	ון וון
	12752 NW 98 <sup>TH</sup> PLACE  NEW Registered Office Address:		<del>.</del>	PH 4: 48	C
	HIALEAH GARDENS	, FL <u>.<b>33</b>018</u>	<del></del>		
the cha agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	ss of the registed liability concers of the limited li	ered office and the busi npany, it is hereby conf ted liability company or ability company.	ness office of the registere irmed that the change(s)	d
Lleans	ature of a member or authorized representative of a member or by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address in writing of this change.			d name of signee er agree to comply with the am familiar with and accep this document is being file ability company has been	e ot d

Signature of Registered Agent