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(Requestor's Name)					
(Address)					
(Address)					
(City/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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A. RIVERS MAR - 6 2023

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	COCO Investments 5, LLC					
	SUBJECT: Name of Limited Liability Company					
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered (Office Change and fe	e(s) are submitted for filing.			
Pleasc	return all correspondence conomicing	this matter to the fol	lowing:			
	Name of Person		-			
TANL	A V. SOTELO, P.A.					
	Firm/Company		-			
4000 1	PONCE DE LEON BLVD NO 470					
	Address		-			
CORA	L GABLES, FLORIDA 33146					
	City/State and Zip Code	2	-			
TVSO	TELO@SOTELOLAW.COM					
F	E-mail address: (to be used for future a	innual report notifica	tion)			
For fu	ther information concerning this matt	er, please call:				
TANIA	A V. SOTELO, Pres.	305 at (925-0643			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the followi	ng 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.

1. Na	ame of the limited liability company:	nts 5, LLC	
2. (a)	8299 NW 30 Terrace	(b) S299 NW 30 Terrace	
2 . (2)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address	of limited liability company: (BE POST OFFICE BOX)
	Miami, Florida 33122	Miami, Florida 33122	
3.	01/30/2017 Date of filing/registration in Florida	L17000 199 4	<u> </u>
5. (a)	Registered Agent and Registered Office shown on the records of TANIA V. SOTELO, P.A.	the Florida Dept. of State:	
	Registered Office Address <u>(MUST BE FLORIDA STREET)</u> 2525 PONCE DE LEON BLVD STE 300	ADDRESS)	
	CORAL GABLES, FL	33134	2022 2022
(b)	Enter name of NEW Registered Agent and/or NEW Registered		2022 FFC 19 FH 2: HA
	TANIA V. SOTELO, P.A.		
	NEW Registered Office Address: 4000 PONCE DE LEON BOULEVARD, SUITE 470		11 2: ## 12: ##
	CORAL GABLES, FL	33146	
change agent v was/we the arti Signal I heret provisi the oblice to merce notified	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable to each organization or the operating agreement of the operating agreement of the operating agreement of the operations of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I if in writing of this change.	registered office and the busines ability company, it is hereby confort the limited liability company of limited liability company. TANIA V. SOTELO, PRES of Printed or type to act in this capacity. I furth	s office of the registered firmed that the change(s) r as otherwise provided in TANIA V. SOTELO, PA ed name of signee