

L17000225282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

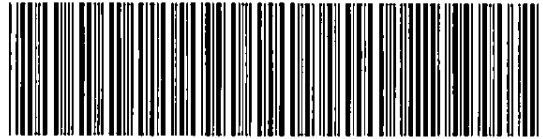
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024 MAY 16 PM 4:52

SECRETARY OF STATE  
TALLAHASSEE, FL

RA Change

JUN 14 2024

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BARILLAS BUILDING LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for fil'.

Please return all correspondence concerning this matter to the following:

VERONICA BARILLAS  
Name of Person

BARILLAS BUILDING LLC  
Firm/Company

10130 NORTHLAKE BLVD STE 214-337  
Address

WEST PALM BEACH, FL 33412  
City/State and Zip Code

VERONICA@BARILLASBUILDING.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VERONICA BARILLAS at ( 813 ) 562-1370  
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 following amount:**

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FL

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

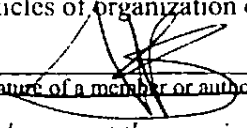
*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: BARILLAS BUILDING LLC
2. (a) 10130 NORTHLAKE BLVD STE 214-337  
Principal office address of limited liability company:  
**(Note: MUST BE STREET ADDRESS)**  
WEST PALM BEACH, FL 33412
- (b) 10130 NORTHLAKE BLVD STE 214-337  
Mailing address of limited liability company:  
**(Note: MAY BE POST OFFICE BOX)**  
WEST PALM BEACH, FL 33412
3. 10/31/2017 Date of filing/registration in Florida
4. L17000225282 Document number
5. (a) GERALDO ROBERTO GOICOCHEA (FRAUD)  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
IMPOSTOR WAS APREHENDED BY HIALEAH GARDENS PD 5/8/24  
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**  
8917 GRAND CANAL DR  
MIAMI, FL 33174
- (b) VERONICA BARILLAS  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
10130 NORTHLAKE BLVD STE 214-337  
**NEW Registered Office Address**:  
WEST PALM BEACH, FL 33412

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TALLAHASSEE, FL

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.

VERONICA BARILLAS

  
Signature of a member or authorized representative of a member

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 of Registered Agent