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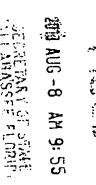
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We To JOH

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TO: Registration Section Division of Corporations	
SUBJECT: Costa Del Sol World T Name of Limite	d 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:
Pedro Martinez Name of Person	
Costa Del Sol World Travels LLC Firm/Company	
150 Se 3rd AVE Address	
Uiami, FL 33131 City/State and Zip Code	
Info@Cos-la Del Solworld Travels. Com E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter, please call:	
Pedro Martinez at (30) Name of Person	5) 731-6872
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
S25 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.

rtoria	a.			
1. N	ame of the limited liability company: <u>Coska De</u>	1 301 W	world Travels ICC	
2. (a)	1401 SW 107 AUC Suite 301K	(h) <u>l</u> (401 Sw 107 Ave Suite 3011c	
	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, FZ 33174		MIami, FC 33174	
			-	
	04/25/2014	۷.	17000231548	
3.	Date of filing/registration in Florida	4.	Document number	_
5. (a)	Sonia Baduy			
	Registered Agent and Registered Office shown on the records o	t the Florida Dept	t. of State:	
	1362 SW 131 PI CIE E			
	Registered Office Address (MUST BE FLORIDA STREET	<u> ADDRESS)</u>		
	. — —		<u></u>	
	<u> </u>	1 <u>. 33184</u>		
			NG NG	•
. (p)	Fredro Martinez Enter name of NEW Registered Agent and/or NEW Registere	d Office address:		
	1401 SW 107 AVR, Svite 301K		· · · · · · · · · · · · · · · · · · ·	
	NEW Registered Office Address:			
	Miami F	L 33174		
If this 1				
the cha	imited liability company is not organized under the la ange or changes are made, the Florida street address of	of the registered	ed office and the business office of the register	ed
was/w	will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members	of the limited	liability company or as otherwise provided in	
	icles of organization or the operating agreement of the			
Signa	La Lacture of a member or authorized representative of a member	<u> Yedro</u>	Printed or typed name of signee	_
	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address. I			e pt
notifie	ery reflect a change in the registerea office address, t d in writing of this change.	merco) conjur	т най на итней натну сотрану наѕ веен	
Signatu	ire of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00