

L17000264351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

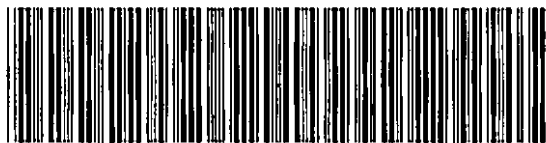
(Business Entity Name)

(Document Number)

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2018 MAY 29 PM 4:58
CLERK OF STATE
AT ALABAMA STATE CAPITOL

B FIGUEROA

MAY 31 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2924 BIRD AVE DEVELOPMENT LLC
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:

ARMANDO MUNS
Name of Person

2924 BIRD AVE DEVELOPMENT LLC
Firm/Company

PO BOX 310575
Address

MIAMI, FL 33231
City/State and Zip Code

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

For further information concerning this matter, please call:

ALEXANDRA BENITEZ at (305) 503-9869
Name of Person 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.

1. Name of the limited liability company: 2924 BIRD AVE DEVELOPMENT LLC

2. (a) 3326 MARY ST, SUITE 401 (b) PO BOX 310575

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 33133

MIAMI, FL 33231

12/29/2017

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3. Date of filing/registration in Florida

4. Document number

5. (a) AGM CONTRACTORS FL LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2121 SW 3RD AVE., SUITE 205

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

MIAMI, FL 33129

(b) AGM CONTRACTORS FL LLC

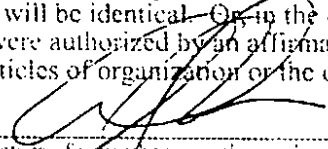
Enter name of NEW Registered Agent and/or NEW Registered Office address:

3326 MARY ST., SUITE 401

NEW Registered Office Address:

MIAMI, FL 33133

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.



ARMANDO MUNS

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

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

2018 MAY 29 PM 4:58
 ACCOUNTS & TAX DEPT. OF STATE
 TALLAHASSEE, FLORIDA
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