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(Requestor's Name)					
(q					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)	-				
	. <u> </u>				
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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	LUCKY ORLANDO INVESTMENT, LLC					
	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.			
Please return	all correspondence concerning the	his matter to the	following:			
Juan Ceba	allos					
	Name of Person					
LUCKY OF	RLANDO INVESTMENT, LL	.c				
	Firm/Company					
21163 NE	18th Place Suite A					
	Address					
Miami, FL	33179					
	City/State and Zip Code					
juanpaceb	allos@mac.com					
E-mail	address: (to be used for future and	nual report notif	ication)			
For further in	formation concerning this matter.	, please call:				
Juan Ceba	llos	786 at (2526670			
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number			
	EET/COURIER ADDRESS:		AILING ADDRESS:			
_	stration Section	Registration Section				
	sion of Corporations	Division of Corporations				
	on Building	P.O. Box 6327				
	Executive Center Circle hassee, Florida 32301	ıa	llahassee, Florida 32314			
	osed is a check for the following	gamount:				
	5 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.

. Na	ame of the limited liability company: LUCKY ORL	ANDO INV	ESTMENT,	, LLC
. (a)		(b)		
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing	g address of limited liability company: e: MAY BE POST OFFICE BOX)
	21163 NE 18th Place	2	1163 NE 18	8th Place
	Miami, FL . 33179	<u>M</u>	iami, FL	. 33179
	01/30/2018	L18	3000026994	4
	Date of filing/registration in Florida	4.	Docu	ıment number
(a)	United States Corporation Agents, Inc			
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET)	<u> </u>		7.5. 10
	13302 Winding Oak Court Suite A			
	Tampa , FI	33612		FILED MR 22 PM
(b)	Acosta Tax & Advisory PA			
. ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address	ţ:	6: 34 LORIDA
	NEW Registered Office Address:			
	15800 Pines Blvd Suite 203			
	Pembroke Pines . FI	33027		
e cha gent v as/we e arti	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of cles of organization or the operating agreement of the large of a member or authorized representative of a member of	f the registere ability composite limited limited liabi	ed office and tany, it is here! liability com lity company. Tuan Printe	the business office of the registere by confirmed that the change(s) ipany or as otherwise provided in
rovisi ie obl mere otified	by accept the appointment as registered agent and aging the solutions of all statutes relative to the proper and complete igations of my position as registered agent as provide the registered office address. It in writing of this change.	performance d for in Chaj hereby confi	of my duties, oter 605, F.S. om that the lin	, and I am familiar with and acce Or, if this document is being file mited liability company has been

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