

LI8000027444

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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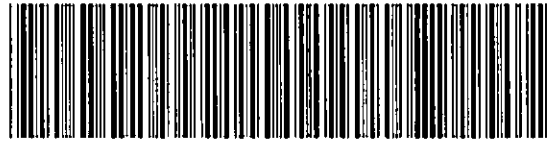
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Grass Knuckles, 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:

Jaime Federico Gonzalez  
Name of Person

Grass Knuckles, LLC  
Firm/Company

7275 SW 89th Street, Suite 723  
Address

Miami, FL 33156  
City/State and Zip Code

felitioar@hotmail.com  
E-mail address: (to be used for future annual report notification)

FILED  
JAN 17 2013  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jaime Federico Gonzalez at ( 305 ) 970-4819  
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: Grass Knuckles, LLC

2. (a) <u>7275 SW 89th Street</u> Principal office address of limited liability company: (Note: <b>MUST BE STREET ADDRESS</b> ) <u>Suite 723</u> <u>Miami, FL 33156</u>	(b) <u>7275 SW 89th Street</u> Mailing address of limited liability company: (Note: <b>MAY BE POST OFFICE BOX</b> ) <u>Suite 723</u> <u>Miami, FL 33156</u>
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3. <u>01/30/2018</u> Date of filing/registration in Florida	4. <u>L18000027444</u> Document number
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5. (a) 1116 Enterprises LLC  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

30 NE 25th St  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Miami, FL 33137

(b) Jaime Federico Gonzalez  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

7275 SW 89th Street  
NEW Registered Office Address:  
Suite 723  
Miami, FL 33156

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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.

Signature of a member or authorized representative of a member

Jaime Federico Gonzalez  
 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