L18000106067

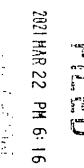
(Requestor's Name)
(Address)
(Address)
(133333)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special maductions to 1 ming officer.

Office Use Only



000360478270

03/22/21--01020--013 **55.00



RARDICHS

MAY 27 2021 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	•
RAM LAW GROUP, PLLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fec(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Reynaldo Martinez	
Name of Person	
RAM LAW GROUP, PLLC	
Firm/Company	_
6201 SW 60 Street	
Address	
Miami, Florida 33143	
City/State and Zip Code	
Reymartinezesq@gmail.com	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, plea	ise call:
Reynaldo Martinez	305 987-5712
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee. FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Enclosed is a check for the following amo	ount:
□ \$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.

	me of the limited liability company:6201 SW 60 Street, South Miami FL 33143	6201 S	6201 SW 60 Street, South Miami FL 33143	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(U)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	04/27/2018	L1800010		
3.	Date of filing/registration in Florida Reynaldo Martinez	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 7713 SW 88 ST Registered Office Address (MUST BE FLORIDA STREET ADDRESS) APT A114		2021 HAR	
	MIAMI F	331456	22	
(b)	Reynaldo Martinez Enter name of NEW Registered Agent and/or NEW Registered Office address: 6201 SW 60 ST NEW Registered Office Address:		22 PH 6: 16	
	South Miami , F	L 33143		
change agent v was/we	mited liability company is not organized under the later or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited be authorized by an aftermative vote of the members cles of organization or the operating agreement of the	e registered office iability company, i of the limited liabi	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in	
<u> </u>	bre of a member or authorized representative of a member	Reynaldo Mai	Printed or typed name of signee	
I herel provisi the obl to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. If it writing of this change.	e nerformance of n	apacity. I further agree to comply with the	