## 118000135381

(R	equestor's Name)	·
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	<del>[</del> ]
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(B	usiness Entity Name	2)
(C	Ocument Number)	<u></u>
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06/28/18--01017--014 **\*\***25.00



6/20/18/00

## COVER LETTER

TO:	Registration Section Division of Corporations		•				
43 <b>5 5 5 5 6 8</b>	INV GLOBAL IMPORT LLC						
SUBJ		Name of Limited Liability Company					
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the	e following:				
DAM	IAN O. NOVO						
	Name of Person		<del>_</del>	,3,1,1			
D'AC	COUNTING CORP.			-			
	Firm/Company			: د			
4990	SW 72nd AVE, SUITE 111			ئد			
	Address			ز. •			
MIAN	1I, FL 33155			i			
***	City/State and Zip Code	-	<del></del>				
damia	an@daccountingcorp.com						
<u>-</u>	-mail address: (to be used for future ann	nual report noti	fication)				
For fu	rther information concerning this matter,	please call:					
DAM	AN O. NOVO	239	919-0474				
<del></del>	Name of Person	at (	Area Code & Daytime Telephone Nun	— iber			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re D P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314				
	Enclosed is a check for the following	amount:					
	■ \$25 Filing Fee	□ <b>\$</b>	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.

I. Na	nne of the limited liability company: INV GLOBAL	L IMPORT LLC			
2. (a)	8200 NW 30TH TER	(b) 8200 N	(b) 8200 NW 30TH TER		
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POS)	·=	
	DORAL, FL 33122	DORAL	, FL 33122		
	05/31/2018	L180001	35381		<u> </u>
3.	Date of filing/registration in Florida	4.	Document number	٠	
5 (0)	LUISBER J. LAMEDA GRANADILLO			. 16.0	
5. (a)	Registered Agent and Registered Office shown on the records o 8200 NW 30TH TER	f the Florida Dept. of Sta	 te:	:	7
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	_	سر قر	
	MIAMI	33122		٦٦ 1	
	Enter name of NEW Registered Agent and/or NEW Registere  8200 NW 30TH TER  NEW Registered Office Address:	d Office address:	_		
	MIAMI, F	I33122	_		
the cha agent v was/we	imited liability company is not organized under the la inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered offic liability company, it is of the limited liability	e and the business of is hereby confirmed t ty company or as other	fice of the	e registered lange(s)
· <b>-</b> -	И	LUISBER J.	LAMEDA GRANA		
=	ture of a member or authorized representative of a member		Printed or typed name of	_	
provisi the obl to mere	by abcept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered affice address, I in writing of this change.	gree to act in this cap e performance of my ed for in Chapter 60, hereby confirm that	pacity. I further agree duties, and I am fam 5, F.S. Or, if this doc the limited liability o	e to comp iliar with zument is zompany l	ly with the and accept being filed has been
Signatu	re of Registered Agent				

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