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K. SALY OCT 25 2018

COVER LETTER

	Registration Section Division of Corporations					
SUBJE	COLOMBIA GROUP, LLC					
30031		Name of Limited Liability Company				
Dear Sir	r or Madam:					
The enc	losed Registered Agent/Registered Off	ice Change ar	nd fee(s) are submitted for filing.			
Please r	eturn all correspondence concerning th	is matter to th	e following:			
GEOR	GES HADAD					
	Name of Person		 .			
COLO	MBIA GROUP, LLC					
	Firm/Company					
10592	NW 67th Terrace					
	Address					
Doral,	, FL 33178					
	City/State and Zip Code					
•	d1968@gmail.com					
Е-	mail address: (to be used for future and	iual report noi	ification)			
For furt	her information concerning this matter.	please call:				
GEOF	RGES HADAD	786	3890953			
	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 Fallahassee, Florida 32314			
	Enclosed is a check for the following amount:					
	№ \$25 Filing Fee		\$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.

1. N	ame of the limited liability company: COLOMBIA C	GROUP, LLC			
2. (a)	Principal Address	(b) Mailin	(b) Mailing Address		
<u> </u>	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	10592 NW 67TH TERRACE	10592	10592 NW 67TH TERRACE DORAL, FL 33178		
	DORAL, FL 33178	DORA			
	09/29/2018	L18000	0190621		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	, HADAD, GEORGES				
. , , ,	Registered Agent and Registered Office shown on the records of Registered Address	the Florida Dept. of S			
	Registered Office Address (MUST BE FLORIDA STREET) 8300 NW 53RD ST350	ADDRESS)	18 OCT 15		
	DORAL FI	33166			
(b)	HADAD, GEORGES		PH 3		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	5 PH 3: 20			
	New Registered Address		34		
	NEW Registered Office Address:		_		
	10592 NW 67TH TERRACE		_		
	DORAL .FI	33178			
the chagent was/w	limited liability company is not organized under the labange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered of iability company, of the limited liab	ffice and the business office of the registered it is hereby confirmed that the change(s) sility company or as otherwise provided in company.		
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee		
provis the ol to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address. I ed in writing of this charge.	ree to act in this of performance of it defor in Chapter hereby confirm ti	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been		
Signat	ure of Registered Agent				