

L18000213643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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19 NOV -7 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 07 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 29, 2019

DANIEL ESPINOZA  
817 SE 2ND AVENUE APT 401  
FORT LAUDERDALE, FL 33316

SUBJECT: DESPI LIFESTYLE LLC  
Ref. Number: L18000213643

We have received your document for DESPI LIFESTYLE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 219A00022318

2019 NOV -7 PM 10:22  
37

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Despi Lifestyle 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:

Daniel Espinoza  
Name of Person

\_\_\_\_\_  
Firm/Company

817 SE 2<sup>nd</sup> Ave Apt 401  
Address

Fort Lauderdale FL 33316  
City/State and Zip Code

despi1@pm.me  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Espinoza at ( 201 ) 888-2426  
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: Despi Lifestyle LLC

2. (a) 817 SE 2nd Ave Apt 401 (b) 7742 N. Kendall Dr. Suite  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Fort Lauderdale, FL 33316 Miami, FL 33156

3. 09/07/2018 4. L18600213643  
Date of filing/registration in Florida Document number

5. (a) United States Corporation Agents, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5575 S. Semoran Blvd  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Suite 36  
Orlando, FL 32822

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TALLAHASSEE, FLORIDA

(b) Daniel Espinoza  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

817 SE 2nd Ave Apt 401  
NEW Registered Office Address:  
Fort Lauderdale, FL 33316

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.

Daniel Espinoza  
Signature of a member or authorized representative of a member

Daniel Espinoza  
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.

Daniel Espinoza  
Signature of Registered Agent