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 Florida Department of State
 Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
 Account Number : 110432003053
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
 TERRAGLAS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2019 FEB 28 PM 1:25

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: TERRAGLAS LLC

2. (a) 1435 MERCADO AVE (b) 1435 MERCADO AVE

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

CORAL GABLES, FL 33146

CORAL GABLES, FL 33146

02/22/2019

L19000047250

3. Date of filing/registration in Florida

4. Document number

5. (a) PEREZ, RAMON C

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1435 MERCADO AVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

CORAL GABLES, FL 33146

(b) Jorge Luis Lopez-Garcia, P.A.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1450 Madruga Ave Ste 408

NEW Registered Office Address:

Coral Gables, FL 33146

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.

Jenisa Irizarry

Jenisa Irizarry, Attorney-in-Fact

Signature of a member or authorized representative of a member

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

Jenisa Irizarry, Attorney-in-Fact

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

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