## L190000 47916

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**I ALBRITTON** 

## COVER LETTER

Division of Corporations			
H&C Homes Collection LLC SUBJECT:			
	of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	te Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Hercules Santos Simao			
Name of Person			
H&C Homes Collection LLC			
Firm/Company			
4329 SUMMIT CREEK BLVD - UNIT 21	08		
Address			
Orlando / FL			
City/State and Zip Code			
claudiopinhopjr@gmail.com			
E-mail address: (to be used for future annu	al report notification)		
For further information concerning this matter, p	olease call:		
Hermes Santos Simao	at 407 371.9049		
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 Tallahassec, Florida 32314		
Enclosed is a check for the following amount:			
<b>☑</b> \$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. Na	me of the limited liability company:	es Collection	LLC		
2. (a)	4329 SUMMIT CREEK BLVD - UNIT 2108	8 (b) 4	329 SUMMIT CREEK BLVD - UNIT 2108		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	ORLANDO - FL - 32837		DRLANDO - FL - 32837		
	February 18th, 2019	 L1	9000047916		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	HERCULES SANTOS SIMAO				
ν (ω)	Registered Agent and Registered Office shown on the record 4329 SUMMIT CREEK BLVD - UNIT 210	ept, of State			
	Registered Office Address (MUST BE FLORIDA STRE	<b>2</b>			
	ORLANDO	. FL_32837	32837  Office address:		
(h)	HERMES SANTOS SIMAO				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	<u>ss:</u>			
	4329 SUMMIT CREEK BLVD - UNIT 210				
	NEW Registered Office Address:				
	ORLANDO	. FL 32837			
the cha agent w was/wo	imited liability company is not organized under the rige or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the member cles of organization or the operating agreement of	s of the register d liability compers of the limite the limited liab	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in		
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obl. to mere notified	owlaccept the appointment as registered agent and ons of all statales relative to the proper and compligations of the position as registered agent as provely reflect a change in the registered office address I in writing of this change.	agree to act in lete performand ided for in Cho s, I hereby conf	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept ipter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		

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