L190000 56263

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200326864772

200326864772 05/24/19--01031--001 **25.00

2019 TETT 2-8 PM 3: 12

RARDICHS

JUN 15 2019 I ALBRITTON

COVER LETTER

Division of Corporations
ARCOS & SONS 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:
MARTIN ARCOS
Name of Person
ARCOS & SONS LLC
Firm/Company
7102 QUAIL HOLLOW DRIVE
Address
Panama City BEACH FL 32408
City/State and Zip Code
ARCOSANDSONS@GMAIL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARTIN ARCOS 504 205-0972
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
NHS18 (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.

a) 7102 QUAIL HOLLOW DRIVE	(b)	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Panama City BEACH FLORIDA 32408		
02/26/2019	 L190	000056263
Date of filing/registration in Florida	4.	Document number
Victor Carnero		
(a) Registered Agent and Registered Office shown on the record	s of the Florida Dept.	of State:
Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	201
7102 QUAIL HOLLOW DRIVE		
Panama City BEACH	, FL_32408	2019:773-373
(b)		P
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office address:	ယ္
MARTIN ARCOS		. ~
NEW Registered Office Address:		
7102 QUAIL HOLLOW DRIVE		
Panama City BEACH	, FL <u>32408</u>	
the limited liability company is not organized under the change or changes are made, the Florida street addresent will be identical. Or, in the case of a Florida limit as/were authorized by an affirmative vote of the member articles of organization or the operating agreement or	e laws of the Stat ss of the registere ed liability compa ers of the limited f the limited liabi	any, it is hereby confirmed that the change(s) liability company or as otherwise provided i
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

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