

L19 000067863

(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



100344247611

05/11/20--01013--011 **25.00

FILED
2020 MAY 11 PM 4:15
CLERK OF COURT

R.A./R.D./CHS

MAY 27 2020

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tina & Marcus, 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:

Marcus Gray

Name of Person

Tina & Marcus, LLC

Firm/Company

2612 West 60 Street #2612

Address

hialeah, FL 33016

City/State and Zip Code

marcusthebarber83@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcus Gray

305

9043125

at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Tina & Marcus, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

2612 west 60 street #2612

hialeah, florida 33016

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

2612 west 60 street #2612

hialeah, florida 33016

03/11/2020

1.19000067863

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

linda laochareun

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

119 north state road 7

plantation FL 33317

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address

julio herrera

NEW Registered Office Address:

666 nw 28 street

miami FL 33127

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.

Marcus L. Graj
Signature of a member or authorized representative of a member

Marcus L. Graj

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.

Julio Herrera
Signature of Registered Agent

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

FILED
2020 MAY 11 PM 4:15
TALLAHASSEE, FL