## 19000112197

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## COVER LETTER .

TO: Registration Section Division of Corporations	
SUBJECT: MILK AND HOSE YELLC	
Name of Li	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent Registered Office Cha	inge and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Massimo Reboa	
Name of Person	······································
Reboa Law Firm	
Firm/Company	<del></del> -
12 SE 7th Street, Ste 704	
Address	<del></del>
Fort Lauderdale, FL 33301	
City/State and Zip Code	<del></del>
info@reboa.law	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Lucia Bordonaro at (	954 530-9781
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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 amoun	nt:
■ \$25 Filling Fee	S55 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 605.0714 v.: 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)	Principal office address of limited liability company:	(b)	Mailing address of limited liability company:
	(Noic: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	12 SE 7th Street, Ste 704		12 SE 7th Street, Ste 704
	Fort Lauderdale, FL 33301		Fort Lauderdale, FL 33301
	04 24 2019	i.	19000112197
	Date of filing/registration in Florida	4.	Document number
(a)			·
(11)	Registered Agent and Registered Office shown on the record-	of the Florida E	lept, of State:
	Sergio Gallone		
	Registered Office Address (MUST BE FLORIDA STRE.	ET ADDRESS)	<u> </u>
	2780 E Atlantic Blvd		
	Pompano Beach	33062	<del></del>
	Pompano Beach	F1	<u> </u>
	Emer name of <u>NEW Registered Agent</u> and or <u>NEW Registered</u> Reboa Law Firm		
	NEW Registered Office Address:		
	12 SE 7th Street, Ste 704		
	Fort Landerdale	FL_33301	
ange ent v is/we	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membelicles of aganization or the operating agreement of the contract	laws of the S the registered I liability com rs of the limit the limited lia	tate of Florida, it is hereby confirmed that after the office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
Signa	nue of a mergoer a authorized representative of a member	<del></del>	Printed or typed name of signee
ovisi	by accept the appointment as registered agent and i ons of all statutes relative to the proper and comple igations of my position as registered agent as prov ly reflect to flange in the registered office address.	ete performan ided för in Ch	ce of my duties, and I am familiar with and accep

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