L19000121961

- Elsa A Castro - 3430 Franklin Ave - Nemi FL 33133				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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COVER LETTER

TO: Registration Section Division of Corporations						
I.R. Consulting LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chan	age and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
INGRID RIBEIRO						
Name of Person						
I.R. Consulting LLC						
Firm/Company	 					
2700 NE 135 Street Unit 48						
Address						
Miami/FL/33181						
City/State and Zip Code						
ribeiroing30@gmail.com						
E-mail address: (to be used for future annual repo	rt notification)					
For further information concerning this matter, please of	eall:					
Elisa A Castro 9:	54 7084634					
Name of Person	Arca 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	NII 0 0 0000					
□ \$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.

2. (a)	2700 NE 135 STREET UNIT 48 ,MIAMI FL 33181	(b	22700 NI	E 135 STREET UNIT 48 ,MIAMI FL 33181
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		<u>-</u>		
	05/06/2019		L 19 000121	961
3.5. (a)	Date of filing/registration in Florida INGRID RIVEIRO	4.		Document number
,	Registered Agent and Registered Office shown on the records of the 2755 SW 187TH AVE MIRAMAR,FL 33029	e Florida	Dept. of Stat	- e:
	Registered Office Address (MUST BE FLORIDA STREET AL 2755 SW 187 TH AVE	DDRESS)	2020 AUG
	MIRAMAR , FL	3029		25 26 1
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ado	lress:	AMIL: 42 OF STATE SEE, F.
	INGRID RIBEIRO			11, 10
	NEW Registered Office Address: 2700 NE 135 STREET UNIT 48			-
	MIAMI FL 3	3181		_
change agent v was/we the arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the re will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the line	egistere ility cor the limi mited li	d office and upany, it is ted liability ability con	d the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in upany.
	ture of a member or authorized representative of a member		146	RID RIBEIRO Printed or typed name of signee
I here provisi the obl to merc	by accept the appointment as registered agent and agree on a number of all statutes relative to the proper and complete points of my position as registered agent as provided justions of my position as registered agent as provided justing of this change.	e to act	in this can	ocity. I further agree to comply with the

Signature of Registered Agent