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## **COVER LETTER**

Division of Corporations	•
SUBJECT: Samuel Express, LLC.	
Name o	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fec(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Marino Petique	
Name of Person	
Samuel Express, LLC.	
Firm/Company	
8721 N. Orangeview Ave	<del></del>
Address	
Tampa, FL. 33617	<u></u>
City/State and Zip Code	
samuelexpress04@gmail.com E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Marino Petique	at ( <u>727</u> ) <u>563-4477</u>
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following am	ount:
■ \$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.

	ame of the limited liability company: Samuel Expre	ss, LLC.		Dadriaus=			
2. (a)	Marino Petique	<del></del>	(b) Miguel				<u> </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)			
	8721 N. Orangeview Ave		4809 E.	. Yukon St.			
	Tampa, FL. 33617		Tampa,	, FL. 33617			
	4/11/2019	_	L190001	41336			
3.	Date of filing/registration in Florida	4.		Document num	ber		
5. (a)	56-2422713						
`	Registered Agent and Registered Office shown on the records of	f the Flor	ida Dept, of Si	<del></del> tate:			
	Jamie Nazario Rodriguez				<b>.</b>	2020 OCT 28	
	Registered Office Address (MUST BE FLORIDA STREE)	"ADDRE	<u>SS)</u>			00	V-1-2-1
	<del>-</del>		- <del></del>		HANASS		OTTORIO OTTORIO OTTORIO
	9408 Glenrosa Ct			<u></u>	5.T: 497:	28	!
	Tampa .F	L 33615			77	P	
	•	- <u></u> -				i.	
(b)	Marino Petique					19	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	ddress:		• •	9	
	Marino Petique						
	NEW Registered Office Address:			<del>_</del>			
	8721 N. Orangeview Ave						
	Tampa	<u>I. 33617</u>					
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability of the li	red office a company, it mited liabil	and the business of is hereby confirm lity company or as	ffice of t red that t	he regi the cha	stered nge(s)
		<u>M</u>	arino Petiqu	je			
Signi	thre of a member or authorized representative of a member			Printed or typed n	ame of sig	nee	
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	e perfort	nance of mi	v duties, and I am	<i>Tamiliar</i>	with a	nd accent

Signature of Registered Agen