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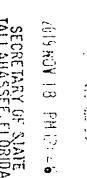
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COVER LETTER

то:	Registration Section Division of Corporations		*
SUBJE	JOICE UTILITIES LLC		
50000	ed Liability Company		
Dear Si	r or Madam:		•
The enc	:losed Registered Agent/Registered Off	īce Change	and fee(s) are submitted for filing.
Please 1	return all correspondence concerning th	is matter to	the following:
ҮОНА	NDRI BOULLOSA ROMERO		
	Name of Person	 	
JOICE	UTILITIES LLC		
	Firm/Company		
1497 \$	SW 48th AVE		
	Address		
FORT	LAUDERDALE FL 33317		
	City/State and Zip Code		
myfasi	tax@yahoo.com		•
E-	mail address: (to be used for future and	ual report r	otification)
For furt	her information concerning this matter.	please call	
ARMA	NDO BARRANTES	754 at (234 0395
	Name of Person	at (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		1 \$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. Na	une of the limited liability company:JOICE UTILITI	ES LL	С	
	4900 SW 17th Street Fort Lauderdale FL 3331	l (b	4900 SW	V 17th
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 4900 SW 17th Street	_ (1)	M	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 17th Street
	Fort Lauderdale FL 33317	- -	Fort Laud	derdale FL 33317
	July 16, 2019		L19000183	33467
3.	Date of filing/registration in Florida	4.	ľ	Document number
5 ()	Yohandri Boullosa Romero			
5. (a)	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State:	
	Yohandri Boullosa Romero			TALLAH
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS	<u>.</u>	平元 2
	1497 SW 48th Ave			TAR SSS
	Fort Lauderdale , FL 3	3317		Y OF STATE
(b)	Enter name of NEW Registered Agent and/or NEW Registered C	Office ado	<u>lress</u> :	TATE DAIDA
	Yohandri Boullosa Romero			
	NEW Registered Office Address:			
	1497 SW 48th Ave			
	Fort Lauderdale FL 3	3317		
the cha agent v was/we the arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member or authorized representative of a member. The accept the appointment as registered agent and agree and complete the accept the appointment as registered agent and agree and complete the accept the appointment as registered agent and agree and complete the accept the appointment as registered agent and agree and complete the accept the appointment as registered agent and agree and complete the accept the appointment as registered agent and agree and accept the appointment as registered agent and agree accept the appointment as registered agent and agent accept the agent agent and agent accept the agent accept the agent agent accept the agent agent accept the agent agent agent agent agent and agent age	he regis bility co the lim mited l Yoh	tered office ampany, it is ited liability compandri Boul	and the business office of the registered shereby confirmed that the change(s) company or as otherwise provided in apany. Illosa Romero Printed or typed name of signee active. I further agree to comply with the
notified	ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I hi I in writing of this change. White B Rowlero	for in C ereby co	ace of my di Thapter 605, infirm that th	iares, and ram jamiliar with this decept , F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Agent			