

L19000220911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

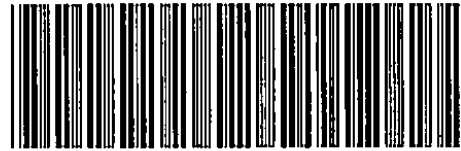
(Business Entity Name)

(Document Number)

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OCT 02 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RV C2C 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:

ROMAN VOLOSHENKO

Name of Person

RV C2C LLC

Firm/Company

7950 NW 53RD STREET SUITE 337

Address

MIAMI, FL 33166

City/State and Zip Code

RVC2C2@GMAIL.COM

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

For further information concerning this matter, please call:

ROMAN VOLOSHENKO at (786) 479-8338
Name of Person 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

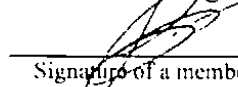
☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
LIMITED LIABILITY COMPANY**

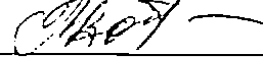
Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, Florida.

1. Name of the limited liability company: RV C2C LLC
2. (a) 7950 NW 53RD STREET
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE 337
MIAMI, FL 33166
- (b) 7950 NW 53RD STREET
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SUITE 337
MIAMI, FL 33166
3. 08/29/2019
Date of filing/registration in Florida
4. L19000220911
Document number
5. (a) VOLOSHENKO, MARINA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2030 S DOUGLAS RD
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
APT 415
CORAL GABLES, FL 33134
- (b) Offix Solutions LLC
Enter name of NEW Registered Agent and/or NEW Registered Office address:
7950 NW 53RD STREET
NEW Registered Office Address:
SUITE 337
MIAMI, FL 33166

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the 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.

 Roman Voloshenko
Signature of a member or authorized representative of a member Printed or typed name of signer

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 the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document to merely reflect a change in the registered office address, I hereby confirm that the limited liability company notified in writing of this change.


Signature of Registered Agent