## 119000 226212

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TALLAHASSEE

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## **COVER LETTER**

TO: Registration Section

INHS18 (2/14)

Division of Corporations		
SUBJECT: REAL ESTATE BY ICS, LLC	;.	
	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Denisse Betancourt Giraldo		
Name of Person	<del></del>	
REAL ESTATE BY ICS, LLC.		
Firm/Company		
1855 SOUTH DIXIE HWY.		
Address		
Pompano Beach, FL 33060		
City/State and Zip Code	<del></del> _	
dbetancourt@icsgroupusa.com		
E-mail address: (to be used for future annu	al report notification)	
For further information concerning this matter, p	please call:	
Denisse Betancourt Giraldo	at () 409-0303	
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 a	amount:	
□ \$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.

BY IC	S, LLC.	
(h)	1855 S.	Dixie Hwy., Pompano Beach, FL
(0)	N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
- -		
<u>L</u>	1900022	26212
4.		Document number
Florida E	Pept. of State	:
DRESS)		: <b>2</b> :
		75°
3060		后强 <b>尼</b>
fice addr	ess:	PILED  2018 DEC 13 PM 4: 55  SECRETARY OF STATE TALLAHASSEE, FL
<del></del> -		
e registe lity com ne limite	ered office ipany, it is ed liability	rida, it is hereby confirmed that after and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Deni	sse Beta	ncourt Giraldo
	-	Printed or typed name of signee
to act is	n this cana	icity. I further agree to comply with the
	(b)  L 4.  Florida D  RESS)  3060  of the S  e registe lity come limited lia  Deni:	L1900022 4.  Florida Dept. of State  DRESS  B060  Fice address:  B3060  Of the State of Flore registered office into company, it is not be interested in the liability company in the liability company. Denisse Beta

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