

L19000 243844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

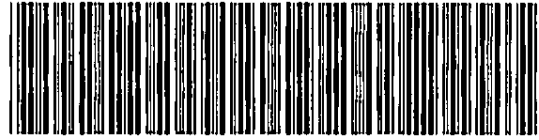
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200338254132

01/02/20--01005--025 **25.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
AND BUSINESS FILINGS

2020 JAN -2 PM 6:43

FILED

JAN 30 2020
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACTUARIAL FACTOR GLOBAL 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:

MS. ESPERANZA MEAD, MANAGER
Name of Person

ACTUARIAL FACTOR GLOBAL LLC
Firm/Company

11050 SW 128TH AVENUE
Address

MIAMI, FL 33186
City/State and Zip Code

emead@actuarialfactor.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Esperanza Mead, Manager at (786) 397.9212
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 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. Name of the limited liability company: ACTUARIAL FACTOR GLOBAL LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
11050 SW 128TH AVENUE
MIAMI, FL 33186

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
11050 SW 128TH AVENUE
MIAMI, FL 33186

3. 8 OCTOBER 2019 4. L19000243844
Date of filing/registration in Florida Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
JOHN ALLEN DAUM CPA
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
10512 SW 137 PLACE
MIAMI, FL 33186

FILED
2020 JAN -2 PM 6:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
ESPERANZA MEAD
NEW Registered Office Address:
11050 SW 128TH AVENUE
MIAMI, FL 33186

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

Esperanza Mead ESPERANZA MEAD, MANAGER
Signature of a member or authorized representative of a member Printed or typed name of signee

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

Esperanza Mead
Signature of Registered Agent