

L19000268578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

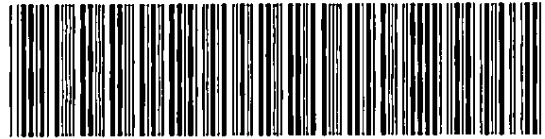
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Black Rock 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:

Gilda Almeida
Name of Person

Gilda Almeida Law, PLLC
Firm/Company

1001 Brickell Bay Drive, Suite 2700
Address

Miami FL 33131
City/State and Zip Code

GILDA@GILDAALMEIDA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gilda Almeida at (305) 775-3349
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: South Black Rock LLC
2. (a) 424 Mallard Lane, Weston FL 33327 (b) same
- Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

10/28/2019

L19000260578

3. Date of filing/registration in Florida 4. Document number

5. (a) Eagle Tax Representation Corp
- Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- 5493 Wilbur Road 105
- Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Coconut Creek FL 33073

- (b) Gilda Almeida Law, PLLC
- Enter name of NEW Registered Agent and/or NEW Registered Office address:

1001 Brickell Bay Drive

SUITE 2700

Miami FL 33131

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change(s) 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) 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.

ROBERTO Sallier Dal Pont

Printed or typed name of signer

I, GILDA ALMEIDA, a member or authorized representative of a member of the limited liability company, do hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of the 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.

Signature of Registered Agent