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(Red	questor's Name)	
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R. Will

COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	Isaac Levi LLC					
	Name of Limited Liability Company					
Dear Sir	or Madam:					
The encle	osed Registered Agent/Registered C	Office Change and for	cc(s) are submitted for filing.			
Please re	turn all correspondence concerning	this matter to the fo	ollowing:			
Isaac Lev	i					
	Name of Person		_			
Isaac Lev	i LLC					
	Firm/Company					
19655 E (Country Club Drive, Apt 607					
	Address					
Miami, Fl	lorida 33180					
	City/State and Zip Code	:	_			
isaaclevip	orod@gmail.com					
E-n	nail address: (to be used for future a	nnual report notific	ration)			
For furth	er information concerning this matte	er, please call:				
Isaac Lev	i	305 at (588-4121			
	Name of Person		Area Code & Daytime Telephone Number			
] []	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
I	Enclosed is a check for the followi	ng amount:				
•	■ \$25 Filing Fee		□ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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.

(a)	19655 E Country Club Drive		(b) SAME	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(=)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Apt 607		SAME	
	Miami, Florida 33180	_	SAME	
	12/3/2019		L1900029	5172
(a)	Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC.	4.		Document number
(4)	Registered Agent and Registered Office shown on the records of to 5575 S. SEMORAN BLVD.	he Flor	ida Dept. of St	rate:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	ESS)	
	Orlando , FL	32822		29
(b)	Isaac Levi Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:	2920 DEC 11
	19655 E Country Club Drive			P
	NEW Registered Office Address: Apt 607	_		
	Miami, FL	33180		_
ange ent w is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization of the operating agreement of the limited liable.	regist bility f the l imite	ered office a company, it imited liabil d liability co	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Signat	sure of a member of authorized representative of a member		aac Levi	Printed or typed name of signee
hereb ovisie obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided thy reflect a change in the registered office address, I h I in writing of this change.	pertor	mance of m	pacity. I further agree to comply with the duties, and I am lamiliar with and according to the complex with and according to the complex with and according to the complex with an according to the complex with a contract wi

Signature of Registers Agent