

L19 CCC 296361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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SUBJECT: CKPG 1800 Funding, LLC

CKPG 1800 Funding, LLC

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Bruno Bloch

Name of Person

Firm/Company

20161 NE 16th Place

Address

City/State and Zip Code _____

bruno@mulcowatches.com

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

Bruno Bloch

786

469-9306

at (_____)

Name of Person _____ Area Code & Daytime Telephone Number _____

Mailing Address:

Street Address:

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: CKPG 1800 Funding, LLC
2. (a) 20161 NE 16th Place
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Miami, FL, 33179
- (b) 20161 NE 16th Place
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Miami, FL, 33179
3. 12/12/2019
Date of filing/registration in Florida
4. L19000296361
Document number
5. (a) Corporate Creations Network INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
801 US Highway 1
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
North Palm Beach, FL 33408
- (b) Stemina Management, LLC
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
20161 NE 16th Place
NEW Registered Office Address:
Miami, FL 33180

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.

Bruno Bloch
Signature of a member or authorized representative of a member

Bruno Bloch

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 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.

Bruno Bloch
Signature of Registered Agent

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