

L20000000365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

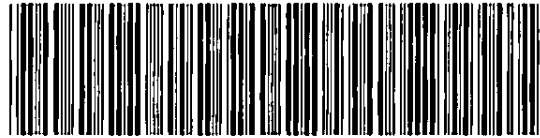
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600340760386

02/14/20--01006--014 ++25.00

20 FEB 14 AM 11:29

MAR 12 2020
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

Caribbean Diamond Music LLC

SUBJECT: _____
Name of Limited Liability Company

20 FEB 14 AM 11:29

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:

Dixie Cisneros

Name of Person

Caribbean Diamond Music LLC

Firm/Company

8246 SW 157TH CT

Address

Miami/Florida 33193

City/State and Zip Code

records@caribbeandiamondmusic.com

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

For further information concerning this matter, please call:

Dixie Cisneros

786

372 2563

Name of Person

at (_____) _____

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.

Caribbean Diamond Music LLC

1. Name of the limited liability company: _____

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

8246 SW 157th CT

Miami FL 33193

12/17/2019

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

965 West 29TH ST APT 2

Hialeah FL 33012

1200000000365

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Dixie Cisneros

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

965 West 29TH ST APT 2

Hialeah

33012

FL

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

2423 SW 147TH AVE #688

Miami

33185

FL

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.

Dixie Cisneros

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.

Signature of Registered Agent

20 FEB 14 AM 11:29