L20000010640

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	<i>= #</i>)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
·					





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10/02/20--01004--023 **25.00

COVER LETTER

TO: Registration Section Division of Corporations		•
SUBJECT: CAMINOS & COMPANY LLC		
	lame of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the	following:
VERONICA CAMINOS		
Name of Person		
CAMINOS & COMPANY LLC		
Firm/Company		_
1736 ESPANOLA DR		
Address		_
MIAMI FI. 33133		
City/State and Zip Code	e	
vcaminosarq@gmail.com		
E-mail address: (to be used for future a	annual report notif	ication)
For further information concerning this matt	ter, please call:	
VERONICA CAMINOS	786 at (399-1436
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	ing amount:	
■ \$25 Filing Fee	□ s	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.

I. Na	ame of the limited liability company: CAMINOS & CO	MPAN	Y LLC		
2. (a)	1736 ESPANOLA DR		(b) 1736 ESPANOLA DR		
(-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	MIAMI, FL 33133	_	MIAMI, FI	_ 33133	
			 		
	01/03/2020		L200000106	40	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	LEGALING CORPORATE SERVICES INC.				
(4)	Registered Agent and Registered Office shown on the records of t 5237 SUMMERLIN COMMONS	the Flori	da Dept. of State	• ::	
	Registered Office Address (MUST BE FLORIDA STREET & SUITE 400	IDDRE.	<u> </u>		
	FORT MYERS .FL	33907			
(b)	VERONICA CAMINOS Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		
	NEW Registered Office Address:				
	1736 ESPANOLA DR				
	MIAMI	33133			
change agent was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of class of organization or the operating agreement of the laws of a member or authorized representative of a member.	registe bility c f the lii limited	red office and ompany, it is nited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. MINOS	
•	•		a to alst	Printed or typed name of signee	
ı nerel provisi the obl to merl notified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p leations of my position as registered agent as provided by reflect or change in the registered office address. I have titing of this change	re to ac perforn I for in ereby c	t in this capa iance of my d Chapter 605, confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been	
Sign	re of Registered Agent				

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