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(Requestor's Name) (Address) (Address)	300389876213
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	05/24/2201025-+025 **25.00
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COVER LETTER				
TO: Registration Section Division of Corporations				
Terralima LLC SUBJECT:				
	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Daniel Huerta				
Name of Person				
Terralima LLC				
Firm/Company				
4088 Nova Ln				
Address				
Naples, Florida 34119				
City/State and Zip Code				
dhuerta@hotmail.com				
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	call:			
Daniel Huerta at (	956 607-7166			
Name of Person	Area Code & Daytime Telephone Numbe			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address:</u> 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 amou	nt:			

🗃 \$25 Filing Fee

D \$55 Filing Fee & Certified Copy

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## 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.

	me of the limited liability company:		4088 Nova Ln (b)	
a) _	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	(0	)	
	Naples, FL 34119		Naples, FL 34119	
	01/27/2020		1.20000033342	
	Date of filing/registration in Florida	 	Document number	
a)	WOOD, BUCKEL AND CARMICHAEL, PLLC			
	Registered Agent and Registered Office shown on the records of 2150 GOODLETTE ROAD NORTH Registered Office Address <u>(MUST BE FLORIDA STREET</u>			
	SIXTH FLOOR			
	Naples, Fl	34102	SEC SEC	
)) <sub>.</sub>	Daniel Huerta		SECRETARY OF 3 THE SECRETARY OF 38	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	l Office ad	dress:	
	4088 Nova Ln			
	<u>NEW</u> Registered Office Address:		ο Ο	
	Naples Fi	34119		
ige it w 'we	mited liability company is not organized under the la or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	registere ability co of the lim -limited l	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided is iability company.	
	יו דוצי א	Dan	iel Huerta	

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. Thereby confirm that the limited liability company has been notified in writing of this change.

7 Signature of Registered Agent

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