120000/21090

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
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SECRETARY OF STATE

JU 04/24/20

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: PROJECTOS E INGENIERIA ALEFER, LLC
Name of Limited Liability Company

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:

PROJECTOS E INGENIERIA ALEFER, LLC

Firm/Company

1882 TARPON BAY DR S - APT 102

Address

NAPLES, FL 34119

City/State and Zip Code

Luis paula 12 @ Yahoo. com

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

For further information concerning this matter, please call:

ERWIN JOEL ANGULO at (321) 315 - 88 68

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 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.

1. Na	me of the limited liability company: PROJECTO	S£	IMGER	JIERIA	ALEFER	2, الد		
	1882 TAPON BAY DR S		(b)	100		EAE ho	DL	S
- (u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		failing addre	ess of limited I	liability	company:
	Apt 102			APT	102			
	NAPIES, FL 34119		-	NAPI	ES, FL	34119		
	05/04/2020		i	_ 200	00 12 1	'n 90		
3.	Date of filing/registration in Florida		4.		Document	 		
5. (a)	ERWIN YOEL ANGULO							
J. (u)	Registered Agent and Registered Office shown on the record	s of the	Florida D	Pept. of State:	:			
	ADD LACIAW POFF							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	APT F					75 E)) A (
	ORLANDO	. FL	328	(1	POZO AUG -3 SECRETARY TALLAHA			
(b)	ERWIN YOEL ANGULO Enter name of NEW Registered Agent and/or NEW Registered Office address: 1882 TARPON BAY DR S				ILED IG -3 AM IO: 20 IARY OF STATE AHASSEE, FL			
	NEW Registered Office Address:							
	APT 102							
	NAPLES	, FL	341	19				
agent w was/we the arti	mited liability company is not organized under the or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the memberles of organization or the operating agreement of	the re d liabi ers of t	gistered lity com he limit	office and pany, it is ed liability bility com	the busing thereby concern company pany.	ess office o onfirmed that or as other	f the rout the consistency the consistency of the c	egistered hange(s)
Signature of a member or authorized representative of a member			ELWIN YOEL ANGULO Printed or typed name of signee					
I herel provision the oblition to mere notified	oy accept the appointment as registered agent and complons of all statutes relative to the proper and compligations of my position as registered agent as provity reflect a change in the registered office address in writing of this change.	agree lete pe vided fa s, I her	to act in rforman or in Ch eby con		-	•	_	ply with the h and accept s being filed has been
٠٤	e of Registered Agent							
Signatui	e or Registered Agent							