## LZO 000 152407

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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.

1. N	ame of the limited liability company: MR YACHT MI	AMILLO			
2. (a)	1521 ALTON ROAD #691MIAMI BEACH, FL 33139	(	(b) 1521 ALTON ROAD #691MIAMI BEACH, FL 33139		
<b>~</b> . (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3.	07/17/2020  Date of filing/registration in Florida		1,20000153	2407  Document number	
	ANTONIO MALIRISSET	₩.		Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1521 ALTON ROAD #691MIAMI BEACH, FL 33139				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2020 J 2020 J SECT SECTAL	
(b)	, F	L			
	ANTONIO MAURISSET	SSEED REPORT			
	Enter name of NEW Registered Agent and/or NEW Registere	E. FL E.TATE E.TATE			
	NEW Registered Office Address: 1521 ALTON ROAD #691MIAMI BEACH, FL 33139				
	, F	l		<del>_</del>	
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register lability co of the lir c limited	ed office as ompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.	
Signa	ature of a member or authorized representative of a member		······································	Printed or typed name of signee	
provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this thange.	: perform	ance of my	duties, and I am familiar with and accept	
Signatt	ire of Registered Agent				

## **COVER LETTER**

TO:	TO: Registration Section Division of Corporations					
SUBJI	MR YACHT MIAMI LLC					
		Name of Limited I	nited Liability Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.			
Please	return all correspondence concernin	g this matter to the	following:			
ANTO	NIO MAURISSET					
	Name of Person					
MR YZ	ACHT MIAMI LLC					
	Firm/Company		<del></del>			
1521 A	LTON ROAD #691					
	Address					
MIAM	LBEACH, FL 33139					
	City/State and Zip Co	de				
mryach	tmiami@gmail.com					
E	-mail address: (to be used for future	annual report noti	fication)			
For fur	ther information concerning this ma	atter, please call:				
Antonic	o Maurisset	786 at (	296-6907			
	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 follow	ving amount:				
	■ \$25 Filing Fee		855 Filing Fee & Certified Copy			
INHS18	3 (2/14)					