L21000131349

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COVER LETTER

TO: Registration Section Division of Corporations		·
SUBJECT: MICHIGAN 1705 LL		
	Name of Limited Lial	oility Company
Dear Sir or Madam:		
The enclosed Registered Agent/Reg	istered Office Change and fe	e(s) are submitted for filing.
Please return all correspondence cor	cerning this matter to the fo	llowing:
HERNAN JASIN		
Name of Pe	rson	-
HERNAN JASIN, CPA		
Firm/Comp	any	-
1460 S. OCEAN BLVD, APT 1101		
Address		•
LAUDERDALE BY THE SEA, FLOR	IDA 33062	
City/State and 2	Zip Code	-
HJASIN@MSN.COM		
E-mail address: (to be used for	future annual report notifica	tion)
For further information concerning to	his matter, please call:	
HERNAN JASIN	954 at (663-9065
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)		

COUNTY OF SURFICIALIZATION

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 co	MICHIGAN 1705	LLC					
2.	(a)	1460 S. OCEAN BLVD, APT	1101		b)	S. OCEAN BL	VD, APT 1101		
	()	•	limited liability company: TREET ADDRESS)			_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		LAUDERDALE BY THE SE	A. FL 33062	_	LAUI	DERDALE BY	THE SEA, FL 3306	52	
		03/19/2021		_	L21000)131349			
3.5.	(a)	Date of filing/regis	ration in Florida	4.		Documei	nt number		
	(4)	Registered Agent and Registered 1936 N.E. 148th STREET	Office shown on the records of the	he Floric	la Dept. o	f State:			
		Registered Office Address (M	UST BE FLORIDA STREET A	DDRES	<u>'S)</u>				
		NORTH MIAMI	, FL_	33181				~	
	(b)	HERNAN JASIN						22 OCT 11 AM 5: 41	
		Enter name of <u>NEW Registered</u>	Agent and/or NEW Registered	Office a	ddress:			= 5.5	
		1460 S. OCEAN BLVD, AP	r 1101						
		NEW Registered Office Address						5: 4.1 5: 4.1	
		LAUDERDALE BY THE SI	A	33062					
ch ag wa	ange ent v is/we	imited liability company is referenced in the Florida or changes are made, the Florida or the cere authorized by an affirmaticles of organization or the o	orida street address of the ase of a Florida limited lia- ive vote of the members of	register bility c f the lir	red offic ompany nited lia	e and the busi , it is hereby o bility compan	ness office of the confirmed that the	registered change(s)	
_	Siona	ture of a member or authorized rep	ravantativa of a mombor		ARIA	LORENA	DURANO NA typed name of signee		
Tri pre the to	herei ovisi e obl mere	by accept the appointment a. ons of all statutes relative to igations of my position as relative relative to igations of my position as relative reflect a change in the red in writing of this change.	revistered avent and avre	e to ac	t in this	capacity I fu	erther agree to con	nnly with the	
Si	gnatu	re of Registered Agent	Cust						