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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
						
Special Instructions to Filing Officer:						
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TO: Registration Section

Divi	sion of Corporations					
SUBJECT:	M&L ENTERPRISES SERVICES Name of Limited Liability Company					
SUBJECT.						
Dear Sir or M	Madam:					
The enclosed	I Registered Agent/Registered	Office Change	and fee(s) are submitted for filing.			
Please return	all correspondence concernin	g this matter to	the following:			
LUIS A. PER	REZ OLIVA					
	Name of Person					
M&L ENTER	RPRISES SERVICES					
	Firm/Company					
4731 SW 132	AVE					
	Address					
MIAMI, FL 3	33175					
	City/State and Zip Co	de				
marielysg03@	rgmail.com					
E-mail	address: (to be used for future	annual report r	totification)			
For further i	nformation concerning this ma	iter, please call	:			
LUIS A, PER	REZ OLIVA	786 at (970-5539)			
	Name of Person		Area Code & Daytime Telephone Number			
Reg Div P.O	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314	·	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enc	losed is a check for the follow	ving amount:				
≅ \$	25 Filing Fee	Ţ	S55 Filing Fee & Certified Copy			
INHS18 (2/1-	4)					

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.

L. Na	me of the limited liability company: M&L ENTERPRI	SES SI	ERN	'ICES	
2. (a)	4731 SW 132 AVE MIAMI, FL 33175		(b)	4731 SW 1	32 AVE MIAMI, FL 33175
- (,	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	_	(. ,	, ,	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	,				
	04/28/2021		I.	.210001975.	27
3. 5. (a)	Date of filing/registration in Florida LUIS A. PEREZ OLIVA	4.	_		Document number
(4)	Registered Agent and Registered Office shown on the records of 4731 SW 132 AVE	· :			
	Registered Office Address (MUST BE FLORIDA STREET)	•			
	MIAMI , FI.	33175			· · · · · · · · · · · · · · · · · · ·
(b)	ALFREDO DIAZ HERNANDEZ				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	add	resy:	
	NEW Registered Office Address:			• ***	
	4731 SW 132 AVE				
	MIAMI, FI	33175			
change agent v was/we	emited 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 are authorized by an affirmative vote of the members of the organization or the operating agreement of the	vs of the registed ability of the li	ne S erec con imi	l office and apany, it is ed liability	If the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
{		<u>A</u>	LFF	EDO DIAZ	HERNANDEZ
I herei I herei provisi the obl to mere notifice	ter/of a rember or authorized representative of a member by accept the appointment as registered agent and agricing of all statutes relative to the proper and complete igations of my position as registered agent as provide livereflect a change in the registered office address. It is writing of his change.	perfor.	man	rce of miv a	luties, and I am familiar with and accept

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