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COVER LETTER

Divisi	ion of Corporations								
SUBJECT:	ELEVADORES SUDAMERICANOS LLC								
SOBJECT	Name of Limited Liability Company								
Dear Sir or M	adam:								
The enclosed	Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.						
Please return a	all correspondence concerning	this matter to the	following:						
ALONSO E E	SCALANTE MALONE								
	Name of Person		_						
ELEVADORE	S SUDAMERICANOS LLC								
	Firm/Company		_						
2500 NW 79TI	H AVE SUITE 121								
	Address								
MIAMI FL 33	122								
	City/State and Zip Code								
karivanesa38@)gmail.com								
E-mail a	ddress: (to be used for future as	nnual report notif	ication)						
For further inf	formation concerning this matte	er, please call:							
ALONSO E. E	SCALANTE MALONE	786 at (296-5004						
	Name of Person	\	Area Code & Daytime Telephone Number						
Regis Divis P.O. I	ing Address: stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303						
Enclo	sed is a check for the following	ng amount:							
■ \$25	5 Filing Fee	☐ \$55 Filing Fee & Certified Copy							

TO: Registration Section

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	ame of the limited liability company: ELEVADORES S	UDAM	ERICANOS	LLC			
2. (a)	2500 NW 79TH AVE SUITE 121	(21				
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	<u> </u>	Mailing addres			
	MIAMI FL 33122	_	MAMIF	1. 33122			
	06/07/2021		L21000264	201			
3.	Date of filing/registration in Florida	- 4.		Document	number		
5. (a)	D ANGELO RENZO						
J. (a)	Registered Agent and Registered Office shown on the records of the	the Floric	la Dept, of Sta	 te:			
	Registered Office Address (MUST BE FLORIDA STREET A	1DDRES	<u></u>	_			
	2801 NW 74TH AVE STE 213	_					
	MIAMI , FL	33122		_	5.	2024 OCT	
(b)	CONSULTING & INVESTMENTS SERVICES USA LLC			0CT 2	-		
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:					ch	:
						AM S:	
	NEW Registered Office Address:			တ			
	2500 NW 79TH AVE SUITE 121	_					
	DORAL	33122					
	, r			_			
change agent v was/we	imited 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 lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the land.	register bility of f the lir limited	red office ar ompany, it i nited liabilit liability cor	id the busine s hereby cor ty company (ss office nfirmed t or as oth	of the that the terwise	registered change(s)
Signa	ture of a member or authorized representative of a member	_		Printed or ty	ped name	of signe	e
provisi the obl to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have a fixed by the change.	ee to ac perform I for in ereby c	t in this cap ance of my Chapter 60, onfirm that	acity. I furt duties, and t 5. F.S. Or, i the limited l	her agre I am Jam I this doo iability d	e to co siliar w cument compas	mply with the ith and accept is being filed ny has been