L21000288939

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

Division of Corporations					
TAGOR LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Char	ige and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	r to the following:				
Vicky Alvarez					
Name of Person					
Caribros LLC					
Firm/Company					
299 Alhambra Cir Ste 403					
Address					
Coral Gables, FL 33134					
City/State and Zip Code					
vicky@caribros.com					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please of	call:				
Vicky Alvarez 30 at (05 479-3265				
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 amoun	t:				
□ \$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.

(a) .	ame of the limited liability company: 601 Brickell Key Drive Ste 901		(b) same as (a)	
(-).	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Miami, FL 33131		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	June 22, 2021	L21	000288939	
7.3	Date of filing/registration in Florida Drummond Consulting LLC	4.	Document number	
(a)	Registered Agent and Registered Office shown on the records of 601 Brickell Key Drive Ste 901			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	PILLAHASS	
	Miami, }	L_33131	TILEU BY 24 PH	
b) .				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address	5	
	Caribros LLC			
	NEW Registered Office Address:			
	299 Alhambra Circle Suite 403			
	Coral Gables.	FL_33134		
ige it w /we artic	mited hiability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members elest of organization or the operating agreement of the fill	ne registered of liability compa of the limited e limited liabil	ffice and the business office of the registered iny, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
Char	1 (A ->) (a.)	SOLUTION	COL FORDINITORO	

Signature of Registered Agent