

L21000471893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

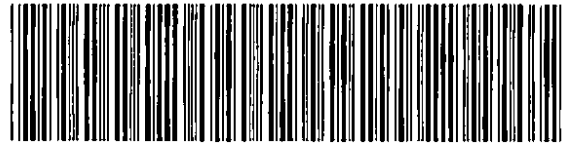
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

SOC
RO RA

Office Use Only



800439541408

11/18/24--01004--023 **25.00

2024 NOV 18 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

NOV 18 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXIM COSTA RICA LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Calderon
Name of Person

EXIM COSTA RICA LLC
Firm/Company

656 Reggie Road
Address

Lake Wales, FL 33859
City/State and Zip Code

kvargast@copaair.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Calderon at (305) 2057505
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

FILED
2024 NOV 18 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FL

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. Name of the limited liability company: EXIM COSTA RICA LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

656 Reggie Road

656 Reggie Road

Lake Wales, FL 33859

Lake Wales, FL 33859

11/01/2021

L21000471893

3. Date of filing/registration in Florida 4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

CALDERON, DEBORAH

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

9945 SW 164 TERRACE

MIAMI, FL 33157

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

656 Reggie Road

Lake Wales, FL 33859

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Roberto K Vargas
Signature of a member or authorized representative of a member

Roberto K Vargas Vargas

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

2024 NOV 18 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED