## LZ10005166Z7

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
☐ SICK-NS	MAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of	Status					
Special Instructions to Filing Officer:							
	. <u>.</u>						

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## **COVER LETTER**

	egistration Section ivision of Corporations						
SUBJEC	1025 NW 37 PL, LLC T:						
BUDULE		Name of Limited Liability Company					
Dear Sir o	or Madam:						
The enclo	sed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.				
Please ret	urn all correspondence concerning th	is matter to the f	Following:				
Ricardo A							
	Name of Person		· · · · · · · · · · · · · · · · · · ·				
1025 NW	37 PL, LLC						
	Firm/Company		_				
1025 NW	37 PL						
	Address						
CAPE CO	PRAL, FL 33993						
	City/State and Zip Code		_				
ricardo@ol	hanareinvestments.com						
E-m	ail address: (to be used for future anr	ual report notifi	cation)				
For furthe	r information concerning this matter,	, please call:					
Ricardo Ar	bona	786 at (	521-6617				
**	Name of Person	(	Area Code & Daytime Telephone Number				
R D P.	Iailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Eı	nclosed is a check for the following	amount:					
	\$25 Filing Fee	_	5 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.

1.	Na	me of the limited liability company: 1025 NW 37 PL, LI	LC —					
2.	(a)	1025 NW 37 PL CAPE CORAL, FL 33993		(b) 14580 SW 20TH ST MIAMI, FL 33175				
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liabil (Note: MAY BE POST OFF	-	• •	
3.		Date of filing/registration in Florida	<b>-</b> 4.	L21000516	Document number			
5.	(a)	EPGD ATTORNEYS AT LAW, P.A.			_			
		Registered Agent and Registered Office shown on the records of the 777 SW 37TH AVE.	e Flo	rida Dept. of Sta	ate:			
		Registered Office Address (MUST BE FLORIDA STREET A) SUITE 510	_					
		MIAMI , FL <sup>3</sup>	3135		_	2023	•	
	(b)	OHANA REAL ESTATE INVESTMENTS LLC				2023 AUG	<u> </u>	
,	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		_	1	34.0 34.0		
		14580 SW 20TH ST				AM II:	<u>소요</u> 는 	
		NEW Registered Office Address:			_	: 27		
		MIAMI	3175		_			
age	ange ent v s/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egist ility the	ered office an company, it limited liabili	nd the business office of the is hereby confirmed that the ty company or as otherwise	e regi: e chai	stered nge(s)	
	ionat	ure of a member or authorized representative of a member	R —	ICARDO ARE		<del></del>		
I h pro the to i	ereb visio obli nere	by accept the appointment as registered agent and agree on sof all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address, I he is in writing of this change.	e to e erfor for is ereby	act in this cap mance of my n Chapter 60, confirm that	Printed or typed name of signo pacity. I further agree to conduites, and I am familiar voluments. F.S. Or, if this documenthe limited liability compa		with the nd accept eing filed is been	
Sig	natur	c of Registered Agent						