L22000239689

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COVER LETTER

	Registration Section Division of Corporations					
SURIFO	A&M TWIN INVESTMENTS LLC					
OUBJEC	Name of Limited Liability Company					
Dear Sir	or Madam:					
The encl	osed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.			
Please re	turn all correspondence concerning to	his matter to the f	following:			
ANA RO	DRIGUEZ					
	Name of Person					
A&M TV	VIN INVESTMENTS LLC					
	Firm/Company		_			
6975 WE	ST 16TH AVE, APT 329					
	Address		na vone			
HIALEA	H,FLORIDA 33014					
	City/State and Zip Code	- · · · - · · · · · · · · · · · · · · ·				
TWINVE	STMENTSLLC@OUTLOOK.COM					
E-1	nail address: (to be used for future an	nual report notifi	ication)			
For furth	er information concerning this matte	r, please call:				
ANA RC	DRIGUEZ	516 at (589-6865			
	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 followin	g amount:				
I	■ \$25 Filing Fee	□ \$5	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)	A&M TWIN INVESTMENTS LLC (b) A&M TV		A&M TW	VIN INVESTMENTS LLC		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	N		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ST 16TH AVE, APT 329	
	6975 WEST 16TH AVE, APT 329					
	HIALEAH, FL, 33014	_		HIALEAF	H, FL, 33014	
	05/23/2022		L	220002396	689	
(a)	Date of filing/registration in Florida MORGAN NOBLE				Document number	
	Registered Agent and Registered Office shown on the records of a NORTHWEST REGISTERED AGENT LLC	he Flor	ida f	Dept. of Stat	te:	
	Registered Office Address (MUST BE FLORIDA STREET A 7901 4TH ST, SUITE 300	(DDRI	<u>:SS)</u>		28	
	ST.PETERSBURG FL	33702				
	ANA RODRIGUEZ				TALLAHASSEE FLORIDA	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	addı	ress:	me P	
	A&M TWIN INVESTMENTS LLC				LORD 1	
	NEW Registered Office Address: 6975 WEST 16TH AVE, APT 329				DA F	
-	_HIALEAH FL	33014			_	
ange ent v is/wo	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 lia are authorized by an aftirmative vote of the members of cles of organization or the operating agreement of the	regist bility f the l limite	ered com imit d lia	l office an npany, it i ed liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany.	
Signa	ture of a member or authorized representative of a member	_			Printed or typed name of signee	
ovisi : obl mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided live reflect a change in the registered office address. It is writing of this change.	perfoi	man	ice of mv	duties, and I am familiar with and acce	

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 F1LING FEE: \$25.00

Signature of Registered Agent