

L22000270733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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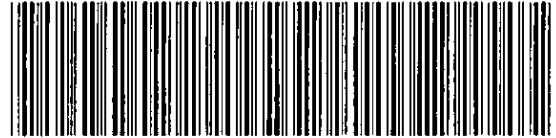
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SECRETARY OF STATE
2023 JUN 29 AM 11:59
OF CORPORATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RLB HOSPITALITY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SEBASTIAN BARRENCHÉ

Name of Person

RLB HOSPITALITY LLC

Firm/Company

6715 NE MIAMI PL.

Address

MIAMI, FL 33138

City/State and Zip Code

SEBASTIAN@WEHOSTGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SEBASTIAN BARRENCHÉ

305 508-8032

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

**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: RLB Hospitality LLC
2. (a) 6715 NE Miami PL
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Miami FL 33138
- (b) 6715 NE Miami PL
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Miami FL 33138
3. 06/14/2022
Date of filing/registration in Florida
4. L22000270733
Document number
5. (a) Sebastian Barreneche
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
68 SE 6th St
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Apt 2209
Miami, FL 33131
- (b) Sebastian Barreneche
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
6715 NE Miami PL
NEW Registered Office Address:
Miami, FL 33138

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DIVISION OF CORPORATIONS
2023 JUN 29 AM 11:59

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.

Signature of a member or authorized representative of a member

Sebastian Barreneche
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 of Registered Agent