

L22000336583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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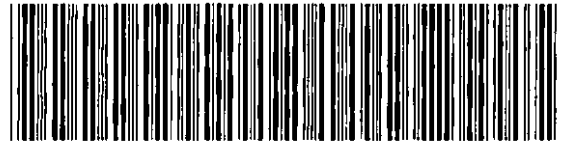
(Business Entity Name)

(Document Number)

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COVER LETTER

O: Registration Section
Division of Corporations

PINO CONTRACTING AND PROCUREMENT SOLUTIONS, LLC

SUBJECT: _____
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:

Paul A. Pino

Name of Person

PINO CONTRACTING AND PROCUREMENT SOLUTIONS, LLC

Firm/Company

520 Coral Way, Suite 2-83

Address

Miami, Florida 33145

City/State and Zip Code

g@pinoprocurementsolutions.com

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

For further information concerning this matter, please call:

Paul A. Pino

786

881-8400

at () _____

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

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DIVISION OF CORPORATIONS

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.

PINO CONTRACTING AND PROCUREMENT SOLUTIONS, LLC

Name of the limited liability company: _____

2546 SW 13 Street, Miami, FL 33145

2520 Coral Way, Suite 2-83, Miami, FL 33145

(a) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

2546 SW 13 Street

Miami, Florida 33145

(b) _____

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

2520 Coral Way, Suite 2-83

Miami, Florida 33145

August 1, 2022

1.22000336583

Date of filing/registration in Florida

4.

Document number

Cheyenne Moseley

(a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Legal Zoom

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

101 N Brand Blvd. 11th Floor

Glendale

91203

FL

Mr. Raul A. Pino

(b) _____

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Raul A. Pino

NEW Registered Office Address:

2546 SW 13 Street

Miami

33145

FL

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.

Raul A. Pino

Signature of a member or authorized representative of a member

Printed or typed name of signer

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

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

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TALLAHASSEE, FL