LZZ 000358589

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TO: Registration Section Division of Corporations

MCMX INVESTMENTS 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:

JOSHUA MARTINEZ-MERCADO

Name of Person

Firm/Company

4336 NEW ST

Address

FORT MYERS, FL 33905

City/State and Zip Code

JOSHUAMARTINEZMERCADO@GMAIL.COM

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

For further information concerning this matter, please call:

JOSHUA MARTINEZ-MERCADO	239 at (986-3210
Name of Person		Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 Filing Fee

□ \$55 Filing Fee & Certified Copy

• 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.

i) _	4336 NEW ST	(b)	4336 NEW ST
/_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	FORT MYERS, FL 33905	ī	FORT MYERS, FL 33905
	8/15/22	L2	2000358589
i)	Date of filing/registration in Florida JUAN, MARTINEZ C	4.	Document number
	Registered Agent and Registered Office shown on the records of 4336 NEW ST	of the Florida D	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	FORT MYERS	33905 FL	THE FLE PH 3: 03
)	JOSHUA MARTINEZ-MERCADO		
· •	Enter name of NEW Registered Agent and/or NEW Register	ess: D TT	
	4336 NEW ST		
	<u>NEW</u> Registered Office Address:		LTE US
	Fort Myers	33905	
ge t w we	imited liability company is not organized under the l or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members	he registered liability com s of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s ed liability company or as otherwise provided
rtic	cles of organization or the operating agreement of th	le minico nai	onity company.

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.

- 1h 1 HI Signature of Registered Agent

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