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(Requestor's Name)		
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PICK-UP	WAIT MAIL	
Pueines	s Entity Name)	
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(Docume	nt Number)	
Certified Copies	Certificates of Status	
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SECRETARY OF SINIE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT:	5900 LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.			
Please return all correspondence concern	ning this matter to the following:			
Hernando La	mas			
Name of Person				
) log				
Fight Company				
5800 SW 107 St. Mign	ni FL 33156			
Miami FL 3 City/State and Zip C	3157e			
hernando @ tech	pluscorp. com ire annual report notification)			
For further information concerning this r	natter, please call:			
Hernando Lamas Name of Person	at (305) 8421838 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 follo	owing amount:			
□ \$25 Filing Fee	☐ \$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.

.l. Na	nme of the limited liability company: 5900 LLC	
2. (a)	5800 SW 107 St. Miami FL 33154(b)	same.
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	08-26-20ZZ	-22000374587
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	PBYA Corporate Services LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	te:
	200 south Andrews Ave. Suite 600	_
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	^3
	Fort Lauderdale	- 23 年
	,FL_33301	SEFRETAF
(b)	_ Hernando Lamas	- :兴 <u>篇</u>
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	PH 4: 37
	5800 SW 107 St.	AIE 37
	NEW Registered Office Address:	
	Miami, FL 33156	_
	. FL	
		-
change agent v was/we	imited liability company is not organized under the laws of the State of Fleor changes are made, the Florida street address of the registered office an will be identical. Or, in the case of a Florida limited liability company, it is the case of the members of the limited liability core authorized by an affirmative vote of the members of the limited liability cores of organization or the operating agreement of the limited liability cores.	d the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
- Ciau	ture of a member or antiprovized representative of a member	Printed or typed name of signee
provisi the obl to mero notified	by accept the appointment as registered agent and agree to act in this cap ons of all statutes relative to the proper and complete performance of my igations of my position as registered agent as provided for in Chapter 602 ly reflect a change in the registered office address, I hereby confirm that I in writing of this change.	dctty. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Agen	