## L23000501428

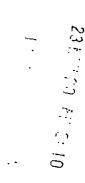
(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	<del>-</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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11/20/23--01017--003 ++25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations			
PLILI LLC SUBJECT:			
	Name of Limited I	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Register	ed Office Change and	d fee(s) are submitted for filing.	
Please return all correspondence concerr	ning this matter to the	following:	
Samuel Romero suarez			
Name of Person		<u> </u>	
Phili llc			
Firm/Company		<del></del>	
11411 NW 7th Street Apt 105			
Address		<del></del>	
Miami, FL 33172			
City/State and Zip (	Code		
samuel.romero.suarez@gmail.com			
E-mail address: (to be used for futt	ire annual report noti	fication)	
For further information concerning this r	natter, please call:		
Samuel Romero	707 at (	383-9409	
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 foll	owing amount:		
\$25 Filing Fee	□ S	☐ \$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.

1. N	Iame of the limited liability company: Pili LLC			
2. <b>(</b> a)			(b)	
<b>-</b> . (-/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		` /	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	11411 NW 7 Street, Miami FL 33172		11411	NW 7 Street, Miami FL 33172
	11/3/2023		L23000	0501428
3.	Date of filing/registration in Florida	4.		Document number
5. (a	Mimaroli Assets Corp			
5. (a	Registered Agent and Registered Office shown on the records o	t the Flor	ida Dept. o	f State:
	Registered Office Address (MUST BE FLORIDA STREET) 11411 NW 7 Street	ADDRE	<u>(S.S.)</u>	23/
	Miami , F	L 33172		
(b)	Maria Isabel Patino Osorio  Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:	
	11411 NW 7 Street			
	NEW Registered Office Address:			
	Miami , F	L 33172		
chang agent was/v the ar	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e regist iability of the l e limite	ered offic company imited lia	the and the business office of the registered of it is hereby confirmed that the change(s) ability company or as otherwise provided in a company.
Sign	. Circuel Ferreiro , nature of a member of			Printed or typed name of signee
I her provi the oi to me notifi	reby accept the appointment as registered agent and ages sions of all statutes relative to the proper and complete bligations of my position as registered agent as providerely reflect a change in the registered office address, led in writing of this change	ree to c e perfor ed for it hereby	ict in this mance of Chapter confirm	capacity. I further agree to comply with the fmy duties, and I am Jamiliar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been