## L24000461317

(Requestor's Name)					
(Ac	ldress)				
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Do	cument Number)				
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SECRETARY OF STATE
TALLAHASSEE, FL



## COVER LETTER

TO: Registration Section Division of Corporations				
GRANITO IMPORT LLC SUBJECT:				
	ame of Limited L	iability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	Office Change and	fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the	following:		
RUGGIA NAPOLIELLO, GUISEPPE				
Name of Person		<u> </u>		
A, My				
Firm/Company		<del></del>	(0)	<b>~9</b>
3025 GREYSTONE LOOP 103			ECRE TALI	2024 DEC -3
Address			LAH	
KISSIMMEE, FL 34741			ECRETARY OF STAT TALLAHASSEE, FL	
City/State and Zip Code	;		E SI	AM 9: 55
GERENCIASNACK316@GMAIL.COM			PTE	Q,
E-mail address: (to be used for future a	nnual report noti	lication)		
For further information concerning this matter	er, please call:			
RUGGIA NAPOLIELLO, GUISEPPE	786 at (	4615738		
Name of Person		Area Code & Daytime Telephone Nu	mber	
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	ı	
Enclosed is a check for the following	ng amount:			
■ \$25 Filing Fee	<b>-</b> S	55 Filing Fee & Certified Copy		

INHS18 (2/14)

TITO

## 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	GRANITO IM ame of the limited liability company:							
2. (a)	RUGGIA NAPOLIELLO, GUISEPPE		(b) :	3025 GRI	EYSTONE LOOP103	KISSIMI	MEE, FI	L 3474 (
2. (4)	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)				
			-					
	10/30/2024	<del></del>	L.2	24000461				
3.	Date of filing/registration in Florida	4.			Document number			
5. (a)					<u></u>			
	Registered Agent and Registered Office shown on the records	of the Flori	ida D	ept. of Stat	te:	S	20	
	Registered Office Address (MUST BE FLORIDA STREI	ET ADDRE	SS)	<del></del>		TAL ECR	2024 DEC -3	777
	3025 GREYSTONE LOOP 103		<del></del>			LAH	(C)	canamin g aroun
	KISSIMMEE	FL 34741			_	CRETARY OF	3	(1)
					<del>-</del>	EE S	ب	U
(b)	DANIEL WLADIMIR MONTENEGRO RONDON					FA	55	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	addro	<u>ess</u> :		Tri		
	NEW Registered Office Address:				_			
	11455 S ORANGE BLOSSOM TRAIL SUITE 18	<u>.</u> .			_			
	ORLANDO	FL 32837						
real of			C.		— :		.a	
change agent v was/w	imited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member	the registe Hiability or rs of the li	red comp mite	office an pany, it i ed liabilit	d the business offices s hereby confirmed ty company or as oth	e of the r	egistere change(	ed [s]
tne art	icles of organization or the operating agreement of t	ne iimitec				1/2 /6 \	_	
Sign	iture of a member or authorized representative of a member	_		<del>9</del> 90	Serve (C) Printed or typed name	of signee	. V3	
I here provisi the obi to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a shange in the registered office address, of practicity of this change.	agree to a ele perfori ded for in I hereby	ct in nanc Cha conf	this cap ce of my apter 603 irm that	acity. I further agreduties, and I am fam 5, F.S. Or, if this do the limited liability	re to com niliar wit cument i company	ply wit h and a s being has be	h the accept filed ren
Signay	of Decistered Agent							