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ADAMS GALLINAR PA

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.
Account Number : I20000000205
Phone : (305) 416-6800
Fax Number : (305) 416-6811

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RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dhernandez@agilaw.com

LLC REGISTERED AGENT CHANGE
PIENETA, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pieneta, LLC

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:

Diane M. Hernandez

Name of Person

Adams Gallinar, P.A.

Firm/Company

1000 Brickell Avenue, Suite 300

Address

Miami, Florida 33131

City/State and Zip Code

dhernandez@agilaw.com

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

For further information concerning this matter, please call:

Diane M. Hernandez

at (305)

416-6800

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

DNHS18 (2/14)

((H140001 3)))

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. Name of the limited liability company: Planeta, LLC
2. (a) 80 S.W. 8th Street
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Suite 2000
Miami, Florida 33130
- (b) 80 S.W. 8th Street
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Suite 2000
Miami, Florida 33130
3. 01/19/2012
Date of filing/registration in Florida
4. M120000000385
Document number
5. (a) Corporation Service Company
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 Hays Street
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Tallahassee, FL 32301-2525
- (b) AGI Registered Agents, Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1000 Brickell Avenue
NEW Registered Office Address:
Suite 300
Miami, FL 33131

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.

Robert R. Adams
Signature of a member or authorized representative of a member

Robert R. Adams, Authorized Representative

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.

Robert R. Adams
Signature of Registered Agent

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

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CORPORATIONS