

(Requestor's Name)
(Address)
. (Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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TO SEP 30 PM 4: 19

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Florida Station Rusiness LLC Name of Foreign Limited Liability Company	
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Andres Abadi Name of Person	
Florida Station Business, LLC Firm/Company	
19262 NE 6th Ave Address	
Miami, FL 33179 City/State and Zip Code	61 SIAK
E-mail address: (to be used for future annual report notification)	SEP 30
For further information concerning this matter, please call:	10 20 E
Andres Aload at (786) 246 4416  Name of Person Area Code & Daytime Telephone Number	4: 19
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:  \$25 Filing Fee	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears State: Florida Station Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19262 NE 6th Ave Miami, FE 33179	
2. The Florida document number of this limited liab	oility company is: <u>M1500005897</u>	<u> </u>
3. Jurisdiction of its organization: Delaw	are 5	12103
4. Date authorized to do business in Florida:	7/27/15	95
SECTION II (5-9 complete only the applicable c	hanges)	co
New name of the limited liability company: (must	contain "Limited Liability Company, " "L.L.C.," or "LLC.")	)5 A
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a	0 7
6. If amending the registered agent and/or registered registered agent and/or the new registered office addressed agent and/or registered agent age	d officer address on our records, enter the name of the new dress here:	
Name of New Registered Agent: - Mares	s Abadi	
New Registered Office Address: 19262	NE 6th Aul  Enter Florida Street Address	
	1iami Florida Street Address  City Florida 33179  Zip Code	
the provisions of all statutes relative to the proper a and accept the obligations of my position as registe.	t and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with red agent as provided for in Chapter 605, F.S. Or, if this in the registered office address. I hereby confirm that the limited	

Title/ Capacity	. <u>Name</u>	Address	Type of Action
16R	Gold-rep Corporati	ion 304 Indian Tro	Add
		#724 Weston, FZ 32	321 Remov
YOR !	Andres Abadi	19262 NE 6th Av	e_ VAdd
	·	Miami, FL 33179	Remov
nRH 1	Marcelo Yungman	19262 NE 6th Ave	Add
		Miami, F 33179	Remove
	· · · · · · · · · · · · · · · · · · ·		Add
			Remove
		·	Add
	•		Remove

Filing Fee: \$25.00