M15000006668

(Requestor's Name)			
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COVER LETTER

TO: Registration Section Division of Corporations	•			
Mobi Pronto, LLC				
SUBJECT:Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
Pedro Rego				
Name of Person				
Mobi Pronto, LLC				
Firm/Company				
3030 North Rocky Point Drive West, Suite 1	50			
Address				
Tampa, FL 33607				
City/State and Zip Code				
pedrojrego@gmail.com				
E-mail address: (to be used for future annual re	port notification)			
For further information concerning this matter, pleas	se call:			
Pedro Rego	₄₀₅ 808-8537			
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			

INHS18 (2/14)

STÅTEMENT 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

. N a	me of the limited liability company: Mobi Pronto,	LLC	
	7147 Trysail Circle	(b) 3030 North Rocky Point Drive West,	
. (u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 150	
	Tampa, FL 33607	Tampa, FL 33607	
	08/21/2015	M15000006668	
	Date of filing/registration in Florida	4. Document number	
. (a)	DIDINI, RUBEM		
, (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State:	
	7147 Trysail Circle		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	
	7147 Trysail Circle		
	Tampa	33607	
(b)	Pedro Rego Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 3030 North Rocky Point Drive West,	Office address:	
	NEW Registered Office Address:		
	Suite 150		
	Tampa, FL	33607 SEE PH 17	
he cha gent v vas/wo he and	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of organization or the operating agreement of the	ws of the State of Florida, it is hereby confirmed that after f the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company. DIDINI, RUBEM	
I here provisi he obi o mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	Printed or typed name of signee ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and acce ed for in Chapter 605, F.S. Or, if this document is being file hereby confirm that the limited liability company has been	

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

Signature of Registered Agent