M15000007059

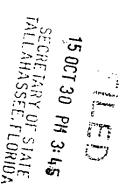
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PICK-UP	☐ WAIT	MAIL
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 14, 2015

VIVA GLOBAL LLC 24330 ANN ARBOR TRAIL DEARBORN HEIGHTS, MI 48127

SUBJECT: VIVA GLOBAL LLC Ref. Number: M15000007059

We have received your document for VIVA GLOBAL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 015A00021768

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Amendment Section

Division of Corporations

JURINGT, VIVA GLOBAL LLC

Name of Corporation

M15000007059

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

24330 ANN ARBOR TRAIL

Address

DEARBORN EHIGHTS, MI 48127

City/State and Zip Code

FRONTDESK@DELPHITAX.COM

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

For further information concerning this matter, please call:

REDA AL-SHAER

,, 313 ,359-0500

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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.

. (µ				Mailing address of limited liability company:	
	(<i>Note: MUST BE STREET ADDRESS</i>) 16192 COASTAL HIGHWAY			(<u>Note: MAY BE POST OFFICE BOX)</u> IN ARBOR TRAIL	
	16192 COASTAL HIGHWAY LEWES, DE 19958	DEADBO		ORN HEIGHTS, MI 48127	
	SEPTEMBER 3, 2015		M15000007059		
	Date of filing/registration in Florida	- 4.		Document number	
a)					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: NADER DALBANI				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4225 NORTHWEST 72ND AVE				
	MIAMI , FI	33166		15 OCT 30 PM 3: 45 SECRETARY OF STATE ALLAHASSEE, FLORIDA	
h)				OCT 30 PM CRETARY OF LAHASSEE FI	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			YY O	
	ABDUL-RAHMAN SOHAD DELBANI			PM 3: 45 OF STATE FLORIO	
	NEW Registered Office Address:			<u> </u>	
	4225 NORTHWEST 72ND AVE			-	
		, _{FL} 33166			

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.

Printed or typed name of signee

Signature of Registered Agent

ignature of a member or authorized representative of a member