## M1900000 5338

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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2019 NOV - 1 AM ID: 07

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## **FILE REQUEST**

October 28, 2019

FLORIDA - SECRETARY OF STATE CORPORATIONS DIVISION P.O. BOX 6327 TALLAHASSEE, FL 32314

Type of Filing:

STATEMENT OF CHANGE - REGISTERED AGENT

Subject:

PACIFIC SEAFOOD - MIAMI, LLC

Form(s) Enclosed:

STATEMENT OF CHANGE - REGISTERED

Supporting Document(s):

Check(s) Enclosed:

\$25.00

Return Via:

**REGULAR MAIL** 

Filing Method:

ROUTINE

Please return to:

Cheryl Conklin

Unisearch, Inc.

1780 Barnes Blvd SW Tumwater, WA 98512 360-956-9500 Ext: 103

Fax: 360-956-9504

cheryl.conklin@unisearch.com

## **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJI	Pacific Seafood - Miami, LLC  Name of Limited Liability Company							
	Name	e of Limited Li	ability Company					
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Office	ce Change and	fee(s) are submitted for filing.					
Please	return all correspondence concerning thi	s matter to the	following:					
Cher	yl Conklin							
	Name of Person	• • • • • • • • • • • • • • • • • • • •	_					
Unise	earch, Inc.							
	Firm/Company							
1780	Barnes Blvd SW							
	Address		<del></del>					
Tum	water, WA 98512							
	City/State and Zip Code		<del></del>					
	yl.conklin@unisearch.com							
	E-mail address: (to be used for future ann	ual report noti	fication)					
For fu	orther information concerning this matter,	plense call:						
Cher	yl Conklin	360 at (	956-9500					
	yl Conklin Name of Person		Arca 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	<b>9</b> 9	655 Filing Fee & Certified Copy					
INHS	18 (2/14)							

## 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.

	me of the limited liability company: Pacific Seato		<del>-</del> .	<del></del>				
2. (a)	Principal office address of limited liability company:	'	Mailing address of limited liability company:					
	(Note: MUST BE STREET ADDRESS) 4450 Northwest 36th Street		( <u>Note: MAY BE POST OFFICE BOX</u> ) 16797 SE 130th Avenue					
	Miami, FL 33166		Clackamas, OR 97015					
	Miami, FL 33166		Clacka	mas, OR 9701				
	05/20/2019		M19000	005338				
3.	Date of filing/registration in Florida	4.		Document num	ber		_	
5. (a)				_				
	Registered Agent and Registered Office shown on the records o NRAI Services, Inc.	f the Flori	da Dept. of Str	nte:				
	Registered Office Address (MUST BE FLORIDA STREET	<del></del>						
	1200 South Pine Island Road							
	Plantation, F	L 3332	4	<del>-</del>	FALL	- AON 6102		
					ATLASSE	AOA		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office :	iddress:	_	CO.	1		
			<del></del>		E. FLORIO	A	$\Pi_{i}$	
	Unisearch, Inc.			_	101	AM EO:	O	
	NEW Registered Office Address:				쏡	07		
	155 Office Plaza Drive		<del></del> -	_	منتذ			
	Tallahassee F	L_3230	1					
signs  I here provise the obto men noutle	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affilinative vote of the members icles of organization or the operating agreement of the nature of another or authorized representative of a member by accept the appointment as registered agent and a link of all standes relative to the proper and completingations of my position as registered agent as providely reflect a change in the registered office address, d'in writing of this change.  Cheryl Conklin, Astree of Rogatered Agent	of the re liability of the l ne limite Ai gree to gree to gree to led for i. I hereby	gistered officompany, it imited liabil id liability conthony J. Dal I liability conthony J. Dal I liability contin this commer of men Chapter 6 confirm the	ce and the busine is hereby confirm lity company or as company. Ponte, General Coun Printed or typed in appacity. I further by duties, and I an	ss office med that s otherw sel name of signature to a familia	e of the the chaise prov	registered nge(s) rided in  e with the	