M20000001780

•	(Requestor's Name)				
•	(Address)				
•	(Address)				
	(City/State/Zip/Phone #)				
	PICK-UP WAIT MAIL				
	(Business Entity Name)				
	· · · · · · · · · · · · · · · · · · ·				
	(Document Number)				
١	`				
1	Certified Copies Certificates of Status				
	Certified Copies Certificates of Status				
Special Instructions to Filing Officer:					





500343897135

05/08/20--01021--030 **25.00





COVER LETTER

· ·	,
	OVER LETTER
TO: Registration Section	The state of the s
Division of Corporations	
Phoenix Trading Florida LLC	imited Liability Company
SUBJECT: Name of L	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Michael Morales	
Name of Person	
Phoenix Trading	
Firm/Company	
10417 sw 23rd ct	
Address	
Miramar FL 33025	
City/State and Zip Code	
morales.michael305@gmail.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Michael Morales	786 445 3088
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Enclosed is a check for the following amount	nt:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (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.

. N	lame of the limited liability company:	ig Florida LL(
. (a)	300 Delaware Ave. Suite 210-A	(b) 12	2590 Pines Blvd #260838
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Wilmington DE 19801	Pe	mbroke Pines Fl 33027
	02/13/20	M20	000001780
	Date of filing/registration in Florida	4.	Document number
. (a	Regina Wellman		
J. (a)	Registered Agent and Registered Office shown on the records 10417 sw 23rd ct	ot, of State:	
	Registered Office Address (MUST BE FLORIDA STREE	- >	
	Miramar .	FL_33025	20 KAY -8 PH 12: 45
/ L :	Mike Morales		2
(b)	Enter name of NEW Registered Agent and/or NEW Register	<u></u> 50 %	
	12590 Pines Blvd #260838		in the
	NEW Registered Office Address:		
	Pembroke Pines	FL_33027	
iang gent as/v	limited liability company is not organized under the ge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of the member ticles.	the registered o liability compars of the limited	ffice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
rovi. ne ol o me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi rely reflect a change in the registered office and sessed ed in writing of this change.	igree to act in t ite performance ded for in Chaj ⊿ hereby confii	his capacity. I further agree to comply with the e of my duties, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed orm that the limited liability company has been
	ture or Registered Agent		