

M22000000114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

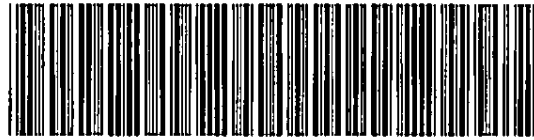
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400397352424

11/14/22--01040--004 44.35.00

FILED

2022 NOV 14 AM 8:32

CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Goldbar Real Estate Advisors LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan Barraneche

Name of Person

Goldbar Real Estate Advisors LLC

Firm/Company

7726 Winegard Rd 2nd Fl Ste B-2844

Address

Orlando, FL 32809

City/State and Zip Code

juan@goldbarteam.com

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

For further information concerning this matter, please call:

Juan Barraneche

Name of Person

at (718) 916 8301

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
2022 NOV 14 AM 8:32
TALLAHASSEE, FL

**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.

1. Name of the limited liability company: Goldbar Real Estate Advisors LLC
2. (a) 7726 Winegard Rd
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
2nd Floor Suite B-2844
Orlando, FL 32809
- (b) 7726 Winegard Rd
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
2nd Floor Suite B-2844
Orlando, FL 32809
3. 1-3-22
Date of filing/registration in Florida
4. M22000000114
Document number

5. (a) David Wilson
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
9837 Kilgore Rd
Orlando, FL 32863

- (b)
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7726 Winegard Rd
NEW Registered Office Address:
2nd Floor Suite B-2844
Orlando, FL 32809

FILED
2022 NOV 14 AM 8:32
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Juan Barropeche
Signature of a member or authorized representative of a member

JUAN BARROPECHE
Printed or typed name of signee

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.

Juan Barropeche
Signature of Registered Agent

JUAN BARROPECHE