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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: LUIS F. LLEONART, CORP.

Name of Corporation

DOCUMENT NUMBER: P05000105869

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:

LLEONART, LUIS

Name of Contact Person

LUIS F. LLEONART, CORP.

Firm/Company

7982 SW 89 STREET,

Address

MIAMI, FL 33156

City/State and Zip Code

Illeonart@arcmiami.net

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

For further information concerning this matter, please call:

LLEONART, LUIS

,,305 \273-6540

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 CORPORATIONS

statement of che	mge is submitted for a corpora	92, 617.0502, 607.1508, or 617,1508, Florida Statutes ation organized under the laws of the State of <mark>Florida</mark> we or registered agent, or both, in the State of Florida.		_
 The name of The principal 	the corporation: LUIS F. LL office address: 7982 SW 8	LEONART, CORP. 89 STREET, MIAMI, FL 33156		
3. The mailing a	nddress (if different):	· · · · · · · · · · · · · · · · · · ·		
4. Date of incor	poration/qualification: 07/28	8/2005 Document number: P05000105	869	
	d street address of the current r rtment of State: (If resigned, er	registered agent and registered office on file with the nter resigned)		
	LLEONART, LUIS F			4124
	9325 SW 82 Avenue		17	N.51.0
	MIAMI, FL 33156		JHL 31	발생 구동.
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):			2	
	LLEONART, LUIS F		9: 1:	AT.
	7982 SW 89 STREE	Т	بنب	6
	MIAMI, FL 33156	P.O. Box NOT acceptable		
The street address changed will	ess of its registered office and be identical.	I the street address of the business office of its registe	ered ag	ent.
Such change wa authorized by the	as authorized by resolution du ne hoard, or the corporation h	ally adopted by its board of directors or by an officer as been notified in writing of the change.	SO	
Signal	root an other or irrector	LUIS LLEONART, President		_
I hereby accept I further agree performance of agent Or, if the	the appointment as registered to comply with the provisions my duties, and I can familiar is document is being filed me	d agent and agree to act in this capacity. To fall statutes relative to the proper and complete with and accept the obligation of my position as regrely to reflect a change in the registered office address notified in writing of this change.	istered 288, I	
_///	4/1/	7/25/2017		
Sig	nature of Registered Agent	Date		-
If signing on be	half of an entity:			
	EONART, CORP.	_ _		
Ţ	yped or Printed Name			

* * * FILING FEE: \$35.00 * * *