P17000067455

(Requestor's Name)
(Address)
(1001033)
(Address)
(Cib. (Chan Zin ID)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(D. 17 - D. 1)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400391875274

2922 ACC -2 FH 3: 31

RA Changl

D CUSHING

COVER LETTER

Division of Corporations LUIS ENRIQUE MARTINEZ PA **SUBJECT:** 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: Luis, Martinez E Name of Person LUIS ENRIQUE MARTINEZ PA Firm/Company 10814 nw 81st ln Address Doral, FI 33178 City/State and Zip Code luisemartinezpa@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARTINEZ, LUIS ENRIQUE 786 212-6048 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: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

TO:

Registration Section

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.

2. (a)		(b) _	
, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10773 Nw 58th St ste #71	10	0773 nw 58th street ste #71
	Doral, Fl 33178		Poral, Fl 33178
	08/10/2017	Pla	7000067455
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Luis, Martinez E		
	Registered Agent and Registered Office shown on the record	s of the Florida De	pt. of State:
	Delication of the Contract of	TET ADDRESS	
	Registered Office Address 10814 NW 81ST LANE	<u>E I AUDKESS)</u>	
	Doral	, FL	
		, FL	
	Luis, Martinez E		
()	Enter name of NEW Registered Agent and/or NEW Registered	ered Office addre	13 :
	NEW Registered Office Address:		<u></u> ယ္
	10773 Nw 58th St ste #71		
	Doral	FI 33178	
hange gent v vas/we	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member of organization or the operating agreement of	the registered of I liability comp rs of the limited	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in illity company
	ture of a member or authorized representative of a member		Printed or typed name of signee
			Demand on several course of circles

Signature of Registered Agent