## 116000059142

(Requestor's Name)							
(Address)							
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(Address)							
(City/State/Zip/Phone #)							
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(Business Entity Name)							
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UDENINIS OCT 12 2022 SECRETARY OF STATE CORPORATIONS

## COVER LETTER

	gistration Section vision of Corporations						
SUBJECT	Supermarket 23 LLC						
SOBJECT	Name of Limited Liability Company						
Dear Sir o	r Madam:						
The enclos	sed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please retu	irn all correspondence concerning thi	s matter to the f	following:				
Anibal Que	evedo						
	Name of Person		<del></del>				
Quevedo L	aw, PLLC						
	Firm/Company		<del></del>				
850 NW 42	2nd Ave, Ste 203						
	Address						
Miami, FL	33126						
	City/State and Zip Code						
quevedo,ar	tibalj@gmail.com						
E-ma	ail address: (to be used for future ann	ual report notif	ication)				
For furthe	r information concerning this matter,	please call:					
Anibal Que	evedo	202 at (	294 0422				
	Name of Person	(	Area Code & Daytime Telephone Number				
R D P.	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
E	nclosed is a check for the following	amount:					
	\$25 Filing Fee	5 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.

(a)	Principal Address		(b) Mailing Address		
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	ipany: M		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  135th Ave	
	2000 NW 135th Ave				
	Miami, FL 33182		Miami, FL	. 33182	
	03/23/2016		1.16000059142		
	Date of filing/registration in Florida	4.		Document number	
(a)				_	
( )	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	e:	
	Anibal Quevedo			_	
	Registered Office Address (MUST BE FLORIDA STREET	<u>S.S)</u>			
	782 NW 42nd Ave, Ste 434			_	
	Miami . FI				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Anibal Quevedo	<u>l Office</u>	address:		
	NEW Registered Office Address:	_	_	_	
	2000 NW 135th Ave			_	
	Miami, Fl	33182	· · · ·	_	
nange gent v as/we	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of organization or the operating agreement of the ture of a member or authorized representative of a member	registe ability of the l limited	ered office ar company, it i imited liabilit	ed the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany.	
rovisi 1e obl 1 mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a charge in the registered office address. It is writing of this change.	ree to a perfor id for ii hereby	ect in this cap mance of my a Chapter 60, confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00