

M21000000225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

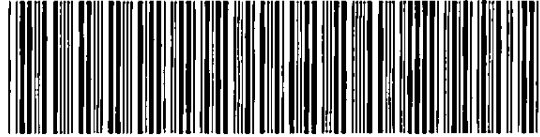
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

Office Use Only



600418355336

11/06/23--01026--007 **35.00

FILED

2023 DEC 20 PM 3:38

SECRETARY OF STATE
BOSTON, MA 02126

RA Change

JAN 25 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Art Chic Made 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:

Lisbet Blokdyk
Name of Person

Art Chic made LLC
Firm/Company

16944 Bridge Crossing Cir
Address

Delray Beach, FL 33446
City/State and Zip Code

Lcprecruiting@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
2023 DEC 20 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Lisbet Blokdyk at (954) 263 1594
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2023

LISBET BLOKDYK
16944 BRIDGE CROSSING CIRCLE
DELRAY BEACH, FL 33446

SUBJECT: ART CHIC MADE LLC
Ref. Number: M21000000225

We have received your document for ART CHIC MADE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Operations Manager A

Letter Number: 923A00027881

**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: Art Chic Made LLC
2. (a) 16944 Bridge Crossing Circle (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
Delray Beach, FL 33446 _____

3. 01/07/2021 4. M21060000225
Date of filing/registration in Florida Document number

5. (a) Corporation Service Company
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 Hay St
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Tallahassee, FL 32301

2023 DEC 20 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FL

(b) Lisbet Blokdyk
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
16944 Bridge Crossing Circle
NEW Registered Office Address:
Delray Beach, FL 33446
_____, 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.

Lisbet Blokdyk
Signature of a member or authorized representative of a member

Lisbet Blokdyk
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.

Lisbet Blokdyk
Signature of Registered Agent