F21000003951

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Cadified Coales Cadificator of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800415374598

09/26/23--01002--025 **35.00

COVER LETTER Amendment Section TO: →Division of Corporations SUBJECT: LULA TECHNOLOGIES, INC. Name of Corporation DOCUMENT NUMBER: F21000003951 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: Amanda Mason Name of Contact Person Sandberg Phoenix Firm/Company 600 Washington Ave - 15th FL Address St. Louis, MO 63101 City/State and Zip Code amason@sandbergphoenix.com

For further information concerning this matter, please call:

AMANDA MASON at (314)425-4926

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

CR2E045 (04/13)

\cdot STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this emge is submitted for a corporation organized under the laws of the State of DELAWARE er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: LULA TECHNOLOGIES, INC.	
	office address: 8950 SW 74TH CT 1506Z	<u>-</u>
· -	address (if different):	-
	poration/qualification: 07/14/2021 Document number: F21000003951	_
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	_
	MICHAEL VEGA-SANZ	
	8950 SW 74TH CT 1506Z MIAMI, FL 33156 2828 SEP 26	ī
	MIAMI, FL 33156 29 1	1
6. The name and (if changed):	The same of the sa	1
	RICHARD MALTBY ORDER 18	
	5801 SW 89th Dr	
	P.O. Box NOT acceptable Gainesville FL 32608	
The street addre	ess of its registered office and the street address of the business office of its registered agent be identical.	
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
MelD	MICHAEL VEGA-SANZ	
I hereby accept I further agree t of my duties, an document is bein corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if the fine filed merely to reflect a change in the registered office address. I hereby confirm that the sheen notified in writing of this change.	re is e
•	chalf of an entity:	
RICHARD MAL	·	
	yped or Printed Name	

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