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EXAMINER



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SECRETARY OF STREET

COVER LETTER

TO: Registration Section Division of Corporations					
•					
SUBJECT: LICANUS LIMITED U.S., LLC					
Name of Limited	d 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 m	atter to the following:				
JESSICA METZGER					
Name of Person					
NATIONAL REGISTERED AGENTS					
Firm/Company					
11600 COLLEGE BLVD., STE 210					
Address					
OVERLAND PARK, KS 66210					
City/State and Zip Code					
, ,					
INFO@NRAI.COM					
INFO@NRALCOM E-mail address: (to be used for future annual report notification)	on)				
For further information concerning this matter, ple	ase call:				
JESSICA METZGER at (800) 550-6724 X 502				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following amo	ount:				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy				
A 22 2 . 22	\$55 1 mmg 1 50 & Columbu Copy				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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:	LICANUS LIMITED U.S., LLC		
2. (a) Principal office address of limited liability compa	any: 1752 LINCOLN PARK CIR		
(Note: MUST BE STREET ADDRESS)	SARASOTA FL 34236 US		
(b) Mailing address of limited liability company:	1752 LINCOLN PARK CIR		
(Note: MAX BE POST OFFICE BOX)	SARASOTA FL 34236 US		
05/24/2001	L01000008354		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:		
Registered Agent:	NATIONAL REGISTERED AGENTS, INC.		
Registered Office Address:	515 EAST PARK AVENUE		
	SUITE 400 TALLAHASSEE FL 32301 US		
	5" (xii P)		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	-0.#		
NEW Registered Agent:	NRAI Services, Inc.		
NEW Registered Office Address:	515 East Park Avenue		
MUST BE FLORIDA STREET ADDRESS)	Tallabassee FL3230		
	Tallahassee FL82301		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as off or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	c Florida street address of the registered office entical. Or, in the case of a Florida limited at a section of the case of a Florida limited at a section of the case of a Florida limited at a section of the case of the register of th		
STUART A. MARTIN Printed or typed mane of signoc			
Signature of Registered Agent	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change, when Metzger, Assistant Secretary		
District of Companying II C. Box	6277 Tallabassas WT 27214		

by:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

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2. (a)	Principal office address of limited liability comp	iny: 1752 LINCOLN PARK CIR				
	(Note: MUST BE STREET ADDRESS)	SARASOTA FL	34236 US			
(b)	Mailing address of limited liability company:	1752 LING	COLN PARK CIF	₹		
	(Note: MAY BE POST OFFICE BOX)	SARASOTA FL	34236 US			
	05/24/2001	L016	000008354			
3. Da	te of filing/registration in Florida	4. Document numb	4. Document number			
5. (a)	Registered Agent and Registered Office shown	on the records of the Fi	lorida Dept. of Sta	tc:		
	Registered Agent:	NATIONAL REG	ISTERED AGE	ATS. LINC		
	Registered Office Address:	515 EAST PARK	515 EAST PARK AVENUE			
			SUITE 400 TALLAHASSEE FL 32301 US			
		TUCHUI DONCE	E 9230100			
(ፁ)	Enter name of NEW Registered Agent and/or l	NEW Registered Offic	e address:	2		
•	Enter name of <u>NEW Registered Agent</u> and/or <u>I</u> <u>NEW Registered Agent</u> :	NRAI Services, Inc.	making Symme	HAY "	*	
NEW Registered Office Address:		515 East Park Avenu		F :		
	(MUST BE FLORIDA STREET ADDRESS)	Tallahassee	,FL32		•	
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National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

April 6, 2012

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Licanus Limited U.S., LLC

Dear Sir/Madam,

For the purposes of changing the registered office and/or registered agent of the above Licanus Limited U.S., LLC.

Please find the enclosed original Certificate of Change of Registered Agent accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Regards,

Jessica Metzger National Registered Agents, Inc.

Enclosure - Check