

L06000025829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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09 SEP 29 AM 11:53
SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

SEP 30 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZERION CAPITAL INVESTMENTS, 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:

THOMAS E. MILLER
Name of Person

ZERION CAPITAL INVESTMENTS, LLC
Firm/Company

1697 DONSEY CT.
Address

ORANGE PARK, FL 32073
City/State and Zip Code

temiller11@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS MILLER at (904) 742-9214
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

SEE LETTER ENCLOSED

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 SEP 18 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 15, 2009

THOMAS E MILLER
1697 DORSEY CT
ORANGE PARK, FL 32073

SUBJECT: ZERION CAPITAL INVESTMENTS, LLC
Ref. Number: L06000025829

We have received your document for ZERION CAPITAL INVESTMENTS, 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 the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 809A00030421



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 SEP 29 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 21, 2009

THOMAS E MILLER
1697 DORSEY CT
ORANGE PARK, FL 32073

SUBJECT: ZERION CAPITAL INVESTMENTS, LLC
Ref. Number: L06000025829

We have received your document for ZERION CAPITAL INVESTMENTS, 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 registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 709A00030932

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: ZERION CAPITAL INVESTMENTS, LLC

2. (a) Principal office address of limited liability company: _____



(Note: **MUST BE STREET ADDRESS**)

1697 DORSEY CT
ORANGE PARK, FL 32073

(b) Mailing address of limited liability company: _____



(Note: **MAY BE POST OFFICE BOX**)

L06000025829

3. Date of filing/registration in Florida

3/10/06

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

RICHARD J. LANTINBERG, ESQ.

Registered Office Address:

6320 ST. AUGUSTINE ROAD, SUITE 2
JACKSONVILLE, FL 32217

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

THOMAS E. MILLER

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1697 DORSEY COURT
ORANGE PARK, FL 32073

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.

Signature of a member or authorized representative of a member

Thomas E. Miller

Printed or typed name of signee

THOMAS E. MILLER

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 608, 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.

Signature of Registered Agent

Thomas E. Miller

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 29 AM 11:00