

L06000032700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2013 DEC 18 PM 4:10
CLERK OF DISTRICT COURT
JULIA S. HARRIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2013

KIMBERLY COLVIN
1425-B EAST COMMERCIAL BLVD.
OAKLAND PARK, FL 33334

SUBJECT: MARTIAL ARTS UNIVERSITY INTERNATIONAL, LLC
Ref. Number: L06000032700

FILED
2013 DEC 18 PM 4:10
TALLAHASSEE, FLORIDA

We have received your document for MARTIAL ARTS UNIVERSITY INTERNATIONAL, 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 LLC. 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) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 313A00025616

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARTIAL ARTS UNIVERSITY INTERNATIONAL, LLC
Name of Corporation

DOCUMENT NUMBER: L76000032700

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:

KIMBERLY COLVIN AS PERSONAL REPRESENTATIVE OF THE ESTATE OF STEPHEN LAVALE
Name of Contact Person

MARTIAL ARTS UNIVERSITY INTERNATIONAL, LLC
Firm/Company

1425-B EAST COMMERCIAL BLVD.
Address

OAKLAND PARK, FL 33334
City/State and Zip Code

PANTUSOANTHONY@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY COLVIN at (954) 776-3656
Name of Contact Person Area Code & Daytime Telephone Number

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

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: MARTIAL ARTS UNIVERSITY INTERNATIONAL, LLC
2. (a) Principal office address of limited liability company: 1425-B EAST COMMERCIAL BLVD.
(Note: MUST BE STREET ADDRESS) OAKLAND PARK, FL 33334
- (b) Mailing address of limited liability company: 1425-B EAST COMMERCIAL BLVD.
(Note: MAY BE POST OFFICE BOX) OAKLAND PARK, FL 33334

- 4/27/06
3. Date of filing/registration in Florida
- L06000032700
4. Document number

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

Registered Agent:

KIMBERLY J. COLVIN

Registered Office Address:

1425-B EAST COMMERCIAL BLVD.
OAKLAND PARK, FL 33334

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

NEW Registered Agent:

KIMBERLY COLVIN AS PERSONAL REPRESENTATIVE OF THE
ESTATE OF STEPHEN LAVANEE, JR. MANAGER

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

1425-B EAST COMMERCIAL BLVD.
OAKLAND PARK, FL 33334

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.

Kimberly Colvin, PR of Estate of the Sole Shareholder.
Signature of a member or authorized representative of a member

KIMBERLY COLVIN, PR OF ESTATE OF THE SOLE SHAREHOLDER.
Printed or typed name of signer

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.

Kimberly Colvin, PR of Estate of the Sole Shareholder
Signature of Registered Agent

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