

LD0000079232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEGAWATTAGE 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:

Michael S Jansen
Name of Person

MEGAWATTAGE LLC
Firm/Company

7333 Miami Lakes Drive Ste 592
Address

Miami Lakes FL 33014
City/State and Zip Code

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

For further information concerning this matter, please call:

Michael S Jansen at (954) 328-0232
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:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2009

MICHAEL S. JANSEN
7333 MIAMI LAKES DRIVE, STE. 592
MIAMI LAKES, FL 33014

SUBJECT: MEGAWATTAGE LLC
Ref. Number: L06000079232

We have received your document for MEGAWATTAGE 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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 009A00018869

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: MEGAWATTAGE LLC
2. (a) Principal office address of limited liability company: 9820 SW 168th St
☐ (Note: **MUST BE STREET ADDRESS**) Miami FL 33157
- (b) Mailing address of limited liability company: 7333 Miami Lakes Drive Ste 592
☐ (Note: **MAY BE POST OFFICE BOX**) Miami Lakes FL 33014
- 8/11/2006 3. Date of filing/registration in Florida
- Lo6 0000 79232 4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: Michael S Jansen
- Registered Office Address: 9715 West Broward Blvd #263
Plantation FL 33324
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW** Registered Agent: Michael S Jansen
- NEW** Registered Office Address: 7333 Miami Lakes Drive
Suite 592
Miami Lakes, FL 33014
(MUST BE FLORIDA STREET ADDRESS)

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.

Michael S Jansen
Signature of a member or authorized representative of a member

Michael S Jansen
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 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.

Michael S Jansen
Signature of Registered Agent

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

FILED
JUN 15 AM 10:55
TALLAHASSEE, FLORIDA