

W07000094305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100129024321

05/19/08--01013--022 **35.00

2008 JUN -2 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

JUN - 2 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2008

LISA KHON
135 WESTON ROAD, #175
WESTON, FL 33326

SUBJECT: TERRA FIRMA SOLUTIONS, LLC
Ref. Number: L07000094305

We have received your document for TERRA FIRMA SOLUTIONS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 408A0003188

2008 JUN -2 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT:

Removal of Registered Officer/Agent : Kathleen Baumann
Change of Principal Corporate Office Address & Mailing Address

DOCUMENT NUMBER: L07000094305 **Date:** Sept. 17, 2007

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:

Lisa Khon
(Name of Contact Person)

TERRA FIRMA SOLUTIONS, LLC
(Firm/Company)

135 Weston Road #175
(Address)

Weston, FL 33326
(City/State and Zip Code)

For further information concerning this matter, please call: Lisa Khon at (877) 880-1544
(Name of Contact Person) Lisa Khon (Area Code & Daytime Telephone Number) 786-942-1644
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Street Address:

Amendment Section
Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045

2008 JUN -2 AM 10: 02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: Terra Firma Solutions, LLC

2. (a) Principal office address of limited liability company: 135 Weston Road #175
Weston, FL 33326
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: _____
(Note: **MAY BE POST OFFICE BOX**)

Sept. 17, 2007
3. Date of filing/registration in Florida

LO7000094305
4. Document number

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

Registered Agent: Kathleen Baumann

Registered Office Address: 49 N. Federal Hwy #192
Pompano Beach, FL 33062

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

NEW Registered Agent: Lisa Khon

NEW Registered Office Address: 135 Weston Road #175
Weston, FL 33326
(**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.

[Signature]
(Signature of a member or authorized representative of a member)

Lisa Khon
(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.

[Signature]
(Signature of Registered Agent)

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