

L09000649817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

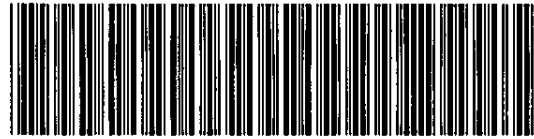
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100252720211

100252720211  
10/21/13--01061--005 \*\*35.00

FILED  
13 NOV 12 PM 2:26  
FALLS CHURCH, VA  
CLERK OF COURT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 28, 2013

MICHELLE MUTNX  
1601 GREEN RD UNIT C  
POMPANO BEACH, FL 33064

SUBJECT: VELOCITY STORAGE AND PACKAGING, LLC  
Ref. Number: L09000049813

We have received your document for VELOCITY STORAGE AND PACKAGING, 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 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) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 613A00025105

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Velocity Storage and packaging the  
Name of Corporation

**DOCUMENT NUMBER:** LO9000049813

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:

Michelle Mutux  
Name of Contact Person

Firm/Company

1601 green rd unit C  
Address

Pompano beach FL 33064  
City/State and Zip Code

Michelle @ ds laboratories.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Mutux at 305, 853-6590  
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: Velocity Storage and packaging LLC
2. (a) Principal office address of limited liability company: 1601 green road unit C  
pompano beach FL 33064  
**(Note: MUST BE STREET ADDRESS)**
- (b) Mailing address of limited liability company: 1601 green road unit C  
pompano beach FL 33064  
LO9000049813  
**(Note: MAY BE POST OFFICE BOX)**
3. Date of filing/registration in Florida: 05-21-2009
4. Document number: \_\_\_\_\_

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

Registered Agent:

Jackson, Julieta S

Registered Office Address:

1680 meridian Ave ste 301  
miami beach FL 33139

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

NEW Registered Agent:

Daniel Klesin

NEW Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

1601 green road unit C  
pompano beach FL 33064

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

Printed or typed name of signee

Julieta Jackson

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

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