

L11000042707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SEP 09 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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15 SEP -9 PM 2: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 26, 2015

SHAHRZAD SAEEDI
10410 LAKE RIDGE DR.
OAKTON, VA 22124

SUBJECT: SET IT OFF BAND LLC
Ref. Number: L11000042707

We have received your document for SET IT OFF BAND 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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 315A00018096

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SET IT OFF BAND 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:

Shahrzad Saeedi

Name of Person

Management

Firm/Company

10410 lake ridge dr.

Address

Oakton, VA 22124

City/State and Zip Code

sherry.saeedi@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shahrzad Saeedi

Name of Person

at (703) 505 - 9354

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

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: SET IT OFF BAND LLC

2. (a) 2555 Redwood way (b) 2555 Redwood way

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Clearwater, FL 33761

Clearwater, FL 33761

3. April 12, 2011 4. L11000642707

Date of filing/registration in Florida

Document number

5. (a) AUSTIN KERR

FEI #: 452596820

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

701 S MADISON AVE 112

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

CLEARWATER, FL 33756

(b) CODY CARSON

Enter name of NEW Registered Agent and/or NEW Registered Office address:

2555 Redwood way

NEW Registered Office Address:

CLEARWATER, FL 33761

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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

Daniel Jean Ashle Clermont
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 605, 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