

L12000002104

(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:

Wings for
Refund \$10.00

Office Use Only



100241394031

11/07/12--01006--005 **35.00

FILED
2013 JAN -4 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

JAN 09 2013

COVER LETTER

LENA LUCKEY
2841 NE 33CT. #401
FT. LAUDERDALE, FL 33308

TO: Registration Section
Division of Corporations

SUBJECT: LUCKEY FINE ART, 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:

LENA LUCKEY
Name of Person

LUCKEY FINE ART, LLC.
Firm/Company

2841 NE 33rd. Ct. #401
Address

FT. LAUDERDALE, FL 33306
City/State and Zip Code

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

For further information concerning this matter, please call:

LENA LUCKEY at (954) 232-8984
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

PAID \$35
INHS18 (5/08) AND
EXPECTING 1041 RETURN TAX!

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JAN -4 PM 12:00

FILED

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

LENA LUCKEY
2891 NE 33rd Ct. #401
FT. LAUDERDALE, FL 33306

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: LUCKEY FINE ART, LLC.

2. (a) Principal office address of limited liability company: L. LUCKEY
(Note: **MUST BE STREET ADDRESS**) 2891 NE 33rd Ct. #401
FT. LAUDERDALE, FL 33306

(b) Mailing address of limited liability company: L. LUCKEY
(Note: **MAY BE POST OFFICE BOX**) 2891 NE 33rd Ct. #401
FT. LAUDERDALE, FL 33306

January 2, 2
3. Date of filing/registration in Florida

? 306 4907 ?
4. Document number

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

Registered Agent:

THE COMPANY CORP.

Registered Office Address:

2711 CENTERVILLE RD. #5. 400
WILMINGTON, DE 19800

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

NEW Registered Agent:

LENA LUCKEY

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

2891 NE 33rd Ct. #401
FT. LAUDERDALE
FL 33306

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.

L. LUCKEY
Signature of a member or authorized representative of a member

LENA LUCKEY
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.

L. LUCKEY
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

*\$35.00

HAS BEEN PAID ALREADY

FILED
JAN - 4 PM 12:00
TALLAHASSEE, FLORIDA
DIVISION OF STATE
CORPORATIONS