L12000052710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
15 APR 13 PM 12:33

C.L.
4-2-15

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2015

TOM POLUM / POLUM ENTERTAINMENT GROUP LLC
2925 CATALINA ST.
MIAMI, FL 33133 US

SUBJECT: POLUM ENTERTAINMENT GROUP LLC
Ref. Number: L12000052710

We have received your document for POLUM ENTERTAINMENT GROUP 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).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 315A00006538

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: POLUM ENTERTAINMENT GROUP 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:

Tom Polum
Name of Person

POLUM Entertainment Group LLC
Firm/Company

2925 Catalina St.
Address

Miami, FL 33133
City/State and Zip Code

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

For further information concerning this matter, please call:

Tom Polum at (786) 214-0704
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

INHS18 (2/14)

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: POLUM ENTERTAINMENT GROUP LLC

2. (a) 2925 Catalina St
Principal office address of limited liability company:
(*Note: MUST BE STREET ADDRESS*)
Miami FL 33133

(b) 2925 Catalina St.
Mailing address of limited liability company:
(*Note: MAY BE POST OFFICE BOX*)
Miami, FL 33133

3. 4/18/2012
Date of filing/registration in Florida

4. L12000052710
Document number

5. (a) Registered Agent Solutions, INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
155 OFFICE PLAZA DR.
Registered Office Address (*MUST BE FLORIDA STREET ADDRESS*)
SUITE A
Tallahassee, FL 32301

(b) Bert Van Middendorp
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
2925 Catalina St #1
NEW Registered Office Address:
MIAMI, FL 33133

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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 of a member or authorized representative of a member

TOM POLUM
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 of Registered Agent

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

INHS18 (2/14)