

L12 000070613

(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:

PA Change

Office Use Only



500253563335

11/08/13--01008--006 \*\*25.00

FILED

13 NOV -8 PM 4:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1.0000 NOV 12 2013

P

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Legion 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:

Jeff Arean

Name of Person

Legion LLC

Firm/Company

31 SE 5th Street #1906

Address

Miami FL 33131

City/State and Zip Code

jeffarean@legionprinting.com

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

For further information concerning this matter, please call:

Jeff Arean

Name of Person

at ( 786 ) 877-4008

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

**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: Legion LLC

2. (a) Principal office address of limited liability company: 7176 SW 103 CRT CIR  
**(Note: MUST BE STREET ADDRESS)** Miami FL 33173

(b) Mailing address of limited liability company: 7176 SW 103 CRT CIR  
**(Note: MAY BE POST OFFICE BOX)** Miami FL 33173

May 24, 2012

3. Date of filing/registration in Florida

4. Document number L12000070613

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

Registered Agent: Jeff Arean

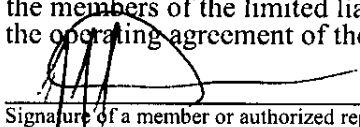
Registered Office Address: 7176 SW 103 CRT CIR  
Miami FL 33173

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

**NEW** Registered Agent: \_\_\_\_\_

**NEW** Registered Office Address: 31 SE 5th Street #1906  
**(MUST BE FLORIDA STREET ADDRESS)** Miami, FL 33131

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

Jeff Arean  
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 of Registered Agent

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