

L12000075322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

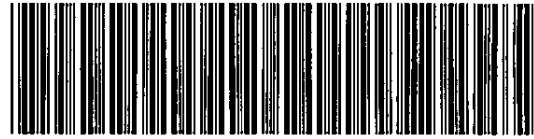
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
14 JUL -1, PM 12:49

RA/RO/CH8
@ 8.5.14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HAIRPORT 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:

KIMBERLY S. LANE
Name of Person

HAIRPORT LLC
Firm/Company

4540 U.S. 1. NO. #4
Address

ST AUGUSTINE, FLORIDA 32095
City/State and Zip Code

RUBDOWN9@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY LANE at (904) 217 0485
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2014

KIMBERLY S. LANE
HAIRPORT LLC
4045-4 US 1 NORTH
ST. AUGUSTINE, FL 32095

SUBJECT: HAIRPORT LLC
Ref. Number: L12000075322

We have received your document for HAIRPORT 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 214A00015472

RECEIVED
14 AUG -4 AM 7:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: HAIRPORT LLC
2. (a) 4540 US 1 NORTH #4
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
St Augustine, Florida
32095
- (b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3. 06/06/2012
Date of filing/registration in Florida
4. L12000075322
Document number
5. (a) United States Corporation Agents Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
13302 Winding Court A
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
Tampa Florida
_____, FL. 32612
- (b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Kimberly S LANCEE
NEW Registered Office Address:
4540 US 1 NORTH #4
St Augustine, FL. 32095

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUN -4, PM 12:49

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.

Kimberly S. Lancee
Signature of a member or authorized representative of a member

Kimberly S. LANCEE
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