

L12 000078539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

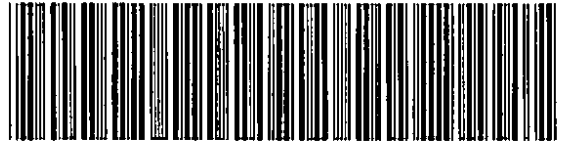
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2020

JOHN PRETE
22911 WHITE OAK LN
ESTERO, FL 33928

SUBJECT: WEARABLE WIRELESS, LLC
Ref. Number: L12000078539

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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).

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.

Querida R Moore
Regulatory Specialist II

Letter Number: 320A00011607

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEARABLE WIRELESS 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:

John PRETE
Name of Person

WEARABLE WIRELESS, LLC
Firm/Company

22911 WHITE OAK LN
Address

ESTERO FL 33928
City/State and Zip Code

JOHN.PRETE@HOUSEMASTER.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John PRETE at (239) 825-7256
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount: PER ATTACHED COVER LETTER, THIS HAS BEEN PAID

☐ \$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 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: WEARABLE WIRELESS, LLC

2. (a) 22911 WHITE OAK LN (b) 22911 WHITE OAK LN

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

ESTERO, FL 33929

ESTERO, FL 33929

3. 06-13-2012 4. L12000078539
Date of filing/registration in Florida Document number

5. (a) UNITED STATES CORPORATION AGENTS, INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5575 S. SEMORAN BLVD SUITE 36
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

ORLANDO FL 32822
_____, FL _____

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

22911 WHITE OAK LN.
NEW Registered Office Address:

ESTERO, FL 33929
_____, FL _____

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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

JOHN PRETE, President
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 07-06-2020