

L13000043618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. BRUCE
MAR 06 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2017

DIAPAZON USA LLC
3573 ENTERPRISE AVENUE, UNIT #73
NAPLES, FL 34104

SUBJECT: DIAPAZON USA, LLC
Ref. Number: L13000043618

We have received your document for DIAPAZON USA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 017A00002439

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
FEB 17 2017
P 10

**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: Diapazon USA LLC

2. (a) <u>3573 Enterprise Avenue</u> Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) <u>unit#73</u> <u>Naples, FL, 34104</u>	(b) <u>3573 Enterprise Avenue</u> Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) <u>unit#73</u> <u>Naples, FL, 34104</u>
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3. <u>03/25/2013</u> Date of filing/registration in Florida	4. <u>L13000043618</u> Document number
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
5. (a) IAO, INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

886 Park Avenue
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 202
Marco Island, FL 34145

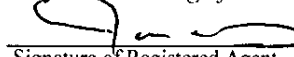
(b) Ilya Korchagin
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
1430 Salvadore Ct.
NEW Registered Office Address:
Marco Island
FL 34145

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TALLAHASSEE, FLORIDA

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	<u>Ilya Korchagin</u> _____ Printed or typed name of signee
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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.

 IAO Inc 3-2-17

Signature of Registered Agent