

L13000098379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATE
15 FEB 23 PM 4:38
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 FEB 23 AM 11:07

FEB 24 2015
T. CARTER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 511904 4709638

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : February 23, 2015

ORDER TIME : 2:17 PM

ORDER NO. : 511904-005

CUSTOMER NO: 4709638

CHANGE OF AGENT

NAME: VIA LUGANO LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Cellina Haigh -- EXT# 3103

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VIA LUGANO 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:

SUZANNE ABAIR

Name of Person

NORTHLAND INVESTMENT CORPORATION

Firm/Company

2150 WASHINGTON STREET

Address

NEWTON, MA 02462

City/State and Zip Code

SABAIR@NORTHLAND.COM

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

For further information concerning this matter, please call:

SUZANNE ABAIR 617 965-7100

Name of Person at () 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 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: VIA LUGANO LLC

2. (a) 2150 Washington Street (b) 2150 Washington Street
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

c/o Northland Investment Corporation c/o Northland Investment Corporation
Newton, MA 02462 Newton, MA 02462

3. 07/10/2013 4. L13000098379
Date of filing/registration in Florida Document number

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

1 INDEPENDENT DRIVE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
SUITE 1300
JACKSONVILLE, FL 32202

(b) Corporation Service Company
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street
NEW Registered Office Address:
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 FEB 23 AM 11:07

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 SUZANNE AB AIR, SECRETARY
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.

Emily Gray Emily Gray
Signature of Registered Agent Corporation Service Company BY: Asst. Vice President

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