

L130000117306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

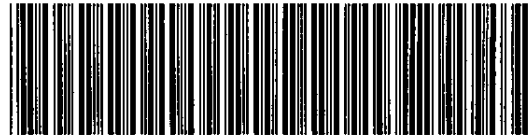
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900262740029

08/15/14--01017--015 **25.00

FILED
OFFICE OF THE CLERK
14 AUG 15 AM 10:42

R + A / Rolchs
@ 8/23/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ventrillion LLC L13000117306
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:

Adam Walker
Name of Person

Ventrillion LLC
Firm/Company

5079 N Dixie Highway #291
Address

Oakland Park, FL 33334
City/State and Zip Code

adamw357@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Walker at (954) 5511035
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

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: Ventrillion LLC

2. (a) 2700 W. Cypress Creek Road (b) 5079 N. Dixie Highway, #291

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

2700 W. Cypress Creek Road, A-106

5079 N. Dixie Highway, #291

Fort Lauderdale, FL 33309

Oakland Park, FL 33334

08/20/2103

L13000117306

3. Date of filing/registration in Florida

4. Document number

5. (a) Baer and Baer CPA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

56 East Pine St,

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2nd Floor

Orlando, FL 32801

(b) Aaron Baer

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

1200 S. Ocean Drive

NEW Registered Office Address:

#901 S

Hollywood, FL 33019

FILED
SECRETARY OF STATE
14 AUG 15 AM 10:42

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]
Signature of a member or authorized representative of a member

Adam Walker
Printed or typed name of signec

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.

Aaron Baer
Signature of Registered Agent