

L13 00014 4702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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JUN 18 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2018

MANSOOREH MOLLASHASEMI
1133 LOUISIAN AVE #212
WINTER PARK, FL 32789

SUBJECT: FLEETZOO LLC
Ref. Number: L13000144702

We have received your document for FLEETZOO 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):

Section 5(a) of the form must match the Florida Department of State's records and Section 5(b) is for the new Registered Agent information.

Please return the corrected original and one copy of 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.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 918A00011829



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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fleet200, 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:

Mansoorah Mollaghasemi
Name of Person

Fleet200, LLC
Firm/Company

1133 Louisiana Ave, Suite 212
Address

Winter Park, FL 32789
City/State and Zip Code

mmollagha@fleet200.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mansoorah Mollaghasemi at (407) 287-6887
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: Flppt 200, LLC

2. (a) 1133 Louisiana Ave. (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Suite 212
Winter Park, FL 32789

3. 10/14/2013 4. 613000144702
Date of filing/registration in Florida Document number

5. (a) Mansoureh Mollaghasemi
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

11301 Corporate Blvd., Suite 303
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando FL 32817

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1133 Louisiana Ave., Suite 212
NEW Registered Office Address:

Winter Park FL 32789

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

Mansoureh Mollaghasemi
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]
Signature of Registered Agent

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

FILED
2010 JUN 14 PM 5:40
CLERK OF STATE
TALLAHASSEE, FLORIDA