## L13000167486

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## COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	Laminar, LLC	
	Nam	e of Limited Liability Company
Dear S	Sir or Madam:	
The en	aclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
Marc	Zuccaro	
•	Name of Person	
Lamir	nar, LLC	
	Firm/Company	
2103	S. Ocean Blvd, Suite 1B	
	Address	<del></del>
Delra	y Beach, FL 33483	
	City/State and Zip Code	
mzuc	caro@alumni.bates.edu	
Ē	E-mail address: (to be used for future ann	ual report notification)
For fu	rther information concerning this matter,	please call:
	MARC ZUCCARO	at (917) 969-7301
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327
	Tallahassee, Florida 32301	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.

Name of the limited liability company: Laminar, L	LC	
2103 S. Ocean Blvd, Suite 1B	(b)	
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Delray Beach, FL 33483		
Dec 3, 2013	L13	000167486
Date of filing/registration in Florida	4.	Document number
Corporation Service Company		
Registered Agent and Registered Office shown on the records	s of the Florida Dept	t. of State:
1201 Hays Street		
Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
Tallahassee	FL_32301	<b></b>
)		- DC - T
Enter name of NEW Registered Agent and/or NEW Registe	ered Office address:	
REGISTERED AGENTS INC		
NEW Registered Office Address:		*
3030 N. Rocky Point Drive, STE 150A		
Tampa	<sub>FL</sub> 33607	
limited liability company is not organized under the	laws of the State	e of Florida, it is hereby confirmed that aft
ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited	s of the registered	d office and the business office of the regis
vere authorized by an affirmative vote of the membe	rs of the limited	liability company or as otherwise provided
ticles of organization or the operating agreement of	the limited liabil	lity company.
ature of a member of authorized representative of a member		MARC CUCCARO
<i>//</i>	manaa 4a4 3. 41	rinned or typed name of signee
eby accept thelappointment as registered agent and sions of all statutes relative to the proper and compl bligations of my position as registered agent as prov rely reflect a change in the registered office address	agree to act in the lete performance ided for in Chap it hereby confir	nts capacity. I jurther agree to comply with of my duties, and I am familiar with and awter 605, F.S. Or, if this document is being to the limited lightlity company has be
ed in writing of this change.	, . no. coy conju	

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

Signature of Registered Agent