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Registration Section

□ \$25 Filing Fee

INHS18 (2/14)

Division of Corporations

SUBJECT: VSA STARTUP LLC
Name of Limited Liability Company

TO:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fce(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERTO FEDE RICI
Name of Person
USA STARTUP LLC
Firm/Company
6926 ANTIGUA PLACE
Address
SARASOTA .FL 34231
City/State and Zip Code
roberTofeoleticiON @ gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please can.
ROBERTO FEDERICI at 941, 2848882
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 P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301
Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy



June 26, 2014

ROBERTO FEDERICI USA STARTUP, LLC 6928 ANTIGUA PLACE SARASOTA, FL 34231

SUBJECT: USA STARTUP, LLC Ref. Number: L14000006751

We have received your document for USA STARTUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Letter Number: 214A00013956

Irene Albritton Regulatory Specialist II

www.sunbiz.org

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.

(a) 6	e of the limited liability company: 926 ANTIGUA PLACE Principal office address of limited lia (Note: MUST BE STREET A	FFL 34231 (b)	6926 AN Mailing a	ddress of limited liability MAY BE POST OFFICE	company:
	01/13/2014		• • •	000 67 51	
	Date of filing/registration in	n Florida 4.	Doçun	nent number	
(a)	egistered Agent and Registered Office sho	um on the manufact the Elevida	Dant of State		
KC,	egistered Agent and Registered Office sno	will on the records of the Florida	Dept. of State.		
Re	egistered Office Address (MUST BE F	: ¾- FLORIDA STREET ADDRESS)			
	CORPARATION SERI	1 1			
				AUACCE	
<u></u>	1201 HAY S ST	REE . FL 39	30 pc 1 ML	JI HTT 3366	
(I-)					
(b)	nter name of NEW Registered Agent and	/or NEW Registered Office add	lress:		
	nter name of <u>NEW Registered Agent</u> and	/or NEW Registered Office add	lress:	14	: 5:2
En		/от <u>NEW Registered Office add</u>	lress:	14 JU	10 to
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