

L15000130655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

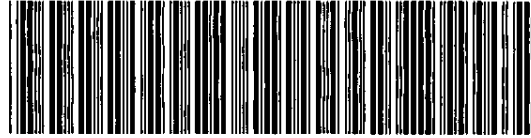
(Business Entity Name)

(Document Number)

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2016 JAN 29 P 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 01 2016

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 5, 2016

ILIAS KAZAKEAS
211 5TH AVENUE
BRUNSWICK, MD 21716

SUBJECT: EDD IMPORTS-EXPORTS, LLC
Ref. Number: L15000130655

We have received your document for EDD IMPORTS-EXPORTS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 216A00000231

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDD IMPORTS EXPORTS 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:

ILIAS KAZAKEAS

Name of Person

EDD IMPORTS EXPORTS LLC

Firm/Company

211 5th Avenue

Address

Brunswick, MD 21716

City/State and Zip Code

edd.imports.exports.llc@outlook.com

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

For further information concerning this matter, please call:

ILIAS KAZAKEAS

Name of Person

at (904)

3774156

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: EDD IMPORTS EXPORTS LLC

2. (a) _____ (b) 211 5th Avenue
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Brunswick

MD 21716

July 30, 2015 (effective August 1, 2015)

L15000130655

3. Date of filing/registration in Florida

4. Document number

5. (a) ILIAS KAZAKEAS

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

421 Monet Avenue

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ponte Vedra, FL 32081

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

REGISTERED AGENTS INC.

NEW Registered Office Address:

3030 N. Rocky Point Drive, STE 150A

Tampa, FL 33607

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TALLAHASSEE, FLORIDA

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

ILIAS KAZAKEAS

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] Bill Havre/Assistant Secretary
Signature of Registered Agent