

L150002067 68

(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



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16 FEB 17 11 AM '17

17 FEB 17 PM 2:06

FILED

FEB 17 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 5, 2017

AMANDA FOLKMAN
2440 MANDALE CT
HOLIDAY, FL 34691

SUBJECT: MINDFUL DAZE MARKETING LLC
Ref. Number: L15000206768

We have received your document for MINDFUL DAZE MARKETING 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 817A00000283

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mindful Daze Marketing 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:

Amanda Folkman
Name of Person

Self / owner
Firm/Company

3527 Mentone Ave #6
Address

Los Angeles, CA 90034
City/State and Zip Code

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

For further information concerning this matter, please call:

Amanda Folkman at (813) 245 - 2256
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

RECEIVED
2017 FEB 17 PM 12:48
TALLAHASSEE, FLORIDA

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: Mindful Daze Marketing LLC

2. (a) 2440 Mondale Ct. (b) SAME

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Holiday, FL 34691

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

3. 12/11/15 Date of filing/registration in Florida 4. L15000206768 Document number

5. (a) LegalZoom Registered Agent Service

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

13302 Winding oaks court suite A
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33612
_____, FL

(b) Amanda Folman

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

2440 Mondale Ct.
NEW Registered Office Address:

Holiday, FL 34691

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

Amanda Folman
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