L16000109102

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP		MAIL
FICK-UP	□ ₩^	III MAIC
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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5. PRATHLA



August 7, 2018

PRADEEPA SIVA ULOKA LLC 340 TAMIAMI TRAIL N., #141 NAPLES, FL 34102

SUBJECT: ULOKA LLC Ref. Number: L16000109102

We have received your document for ULOKA 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 form you submitted is for a Florida Corporation, but your entity is a Florida LLC. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Letter Number: 718A00016259

Stacy Prather Regulatory Specialist III

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: ULDKA ULC 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:					
Pradoepa Crowell Name of Person					
VLDKA LLC Firm/Company					
436 Puller Point Count					
Naples FL 34103 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Produpt Crowll at (617,899,4074) 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					

INHS18 (2/14)

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.

тютас	ltt.			
I. Na	ame of the limited liability company: ULOKA		alh of al	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		ng address of limited liab	
	Naplus FL 34103	#	141	
		Nuple	o fi	34/02
3.	Date of filing/registration in Florida 4.	<u> </u>	cument number	02
5. (a)	1		edirent namber	
	Registered Agent and Registered Office shown on the records of the Flo Registered Office Address (MUST BE FLORIDA STREET ADDR	jour	A	
	Naples FC 34103		ALL A	;
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office	a add	ASSEE FLO	P 26 PM
()	NEW Registered Office Address:	out	DRIDA	1: 12
	Naples FL 3	4103		
the cha agent v was/ye	limited liability company is not organized under the laws of ange or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liability and attirmative vote of the members of the ticks of organization or the operating agreement of the limit	egistered office an y company, it is he Timited liability co	d the business office reby confirmed that t impany or as otherwis	of the registered he change(s)
XI	autre of a member or authorized representative of a member	radelpa		<u>ll</u>
Izherel Irdvisi tre obl to mere	thy accept the appointment as registered agent and agree to tions of all statutes relative to the proper and complete perfo- digetions of my position as registered agent as provided for well reflect a change in the registered office address, I hereh ed in regiting of this change.	act in this capacit	v. I further agree to	comply with the
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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature by Registered Agent