

L16000116383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

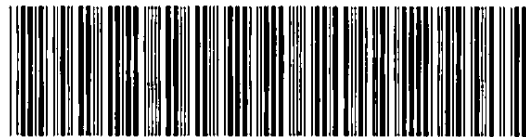
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S. WARREN

JUL 14 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 27, 2017

DANIEL MALCOLM
6638 WHIRLAWAY CIRCLE
ORLANDO, FL 32818

SUBJECT: MALCOLMICS, LLC
Ref. Number: L16000116383

We have received your document for MALCOLMICS, 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 CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

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 Warren
Regulatory Specialist II

Letter Number: 917A00013038

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MALCOLMICS, 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:

IMOGENE MALCOLM
Name of Person

Firm/Company

6638 Whirlaway Circle
Address

Orlando, FL 32818
City/State and Zip Code

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

For further information concerning this matter, please call:

Imogene Malcolm at (407) 536-1402
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

**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: MALCOLMICS, LLC

2. (a) 6638 Whirlaway Circle (b) P.O. BOX 680604

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Orlando, FL 32818

Orlando, FL 32868

3. 6/16/2016 Date of filing/registration in Florida 4. L16000116383 Document number

5. (a) UNITED STATES CORPORATION AGENTS, INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 WINDING OAK COURT
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

A
TAMPA, FL 33612

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

6638 Whirlaway Circle
NEW Registered Office Address:

Orlando, FL 32818

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

DANIEL MALCOLM
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.

IMalcolm
Signature of Registered Agent

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17 JUL 13 PM 12:32
TALLAHASSEE, FLORIDA