

216000119113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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JUL 27 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2018

KIMBERLY MAGEE
11093 LYNWOOD PALM WAY
WEST PALM BEACH, FL 33412

SUBJECT: TOY ADDICT LLC
Ref. Number: L16000119113

We have received your document for TOY ADDICT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 518A00014776

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DIVISION OF CORPORATIONS
TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOY ADDICT 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:

KIMBERLY MAGEE

Name of Person

TOY ADDICT LLC

Firm/Company

11093 LYNWOOD PALM WAY

Address

WEST PALM BEACH, FL 33412

City/State and Zip Code

eightysgirl88@aol.com and fgsaccting@gmail.com

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

For further information concerning this matter, please call:

Gene Sorem

at (979)

218-6215

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: TOY ADDICT LLC

2. (a) 11093 LYNWOOD PALM WAY (b) 11093 LYNWOOD PALM WAY

Principal office address of limited liability company:

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

WEST PALM BEACH, FL 33412

Mailing address of limited liability company:

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

WEST PALM BEACH, FL 33412

June 21, 2016

L16000119113

3. Date of filing/registration in Florida

4. Document number

5. (a) UNITED STATES CORP AGENTS, INC

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

13302 WINDING OAK COURT A

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

TAMPA, FL 33612

(b) KIMBERLY MAGEE

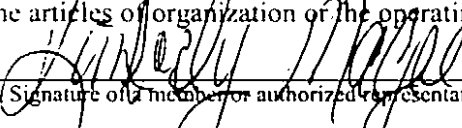
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

11093 LYNWOOD PALM WAY

NEW Registered Office Address:

WEST PALM BEACH, FL 33412

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 of a member or authorized representative of a member)

JOEL L MAGEE

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 of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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18 JUL 26 AM 7:27
TALLAHASSEE, FLORIDA
SECRETARY OF STATE