

Jul. 28. 2016 1:58PM

No. 0152 P. 1

7/28/2016

Division of Corporations

L16000183636
Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: elizabeth.irvine@gray-robinson.com

**LLC REGISTERED AGENT CHANGE
OPTUNL LLC**

Certificate of Status	0
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JUL 29 2016
J. HARRIS

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Optuni 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:

Alexandria V. Hill, Esq.

Name of Person

GrayRobinson, P.A.

Firm/Company

50 N. Laura Street, Suite 1100

Address

Jacksonville, FL 32202

City/State and Zip Code

alexandria.hill@gray-robinson.com

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

For further information concerning this matter, please call:

Alexandria V. Hill, Esq.

Name of Person

at (904) 598-9929

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.

1. Name of the limited liability company: Optuni LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
124 5th Avenue N.
Jacksonville Beach, FL 32250

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
124 5th Avenue N.
Jacksonville Beach, FL 32250

06/28/2016 L16000123636

3. Date of filing/registration in Florida 4. Document number

5. (a) Justin J. Dennis
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
845 Shoreline Circle
Ponte Vedra Beach, FL 32082

(b) Alexandria V. Hill, Esq.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
GrayRobinson, P.A.
NEW Registered Office Address:
50 N. Laura Street, Suite 1100
Jacksonville, FL 32202

FILED
16 JUL 28 AM 9:22
SECRETARY OF STATE
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.

Justin Dennis
Signature of a member or authorized representative of a member

Justin J. Dennis
Printed or typed name of signer

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.

Alexandria V. Hill
Signature of Registered Agent