

L16000 137175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

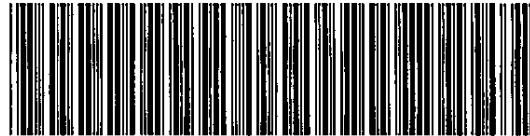
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JUL 27 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 28 2016
J. HARRIS

OBJECT LEGAL INCORPORATED
5850 GRANITE PARKWAY, SUITE 215
PLANO TX 75024
TEL: 844-386-0178
FAX: 214-317-4754
EMAIL: Krystal@legalinc.com

DOCUMENT FILING REQUEST LETTER

Date Mailed: 7/25/2016

From: Krystal Green-Johnson

To: Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ATTN: Document Filing Division

Name of Company: NO FRIZZ LLC

Please file the attached formation documents, and return the following:

[1] Plain Copy of the filed documents

****Please Fax/Email a copy of the filed documents upon acceptance of filing, if you have any questions on the filing please call me or email me at the number and email listed above****

**PLEASE RETURN FILED DOUCMENTS TO :
OBJECT LEGAL INCORPORATED
5850 GRANITE PARKWAY, SUITE 215
PLANO TX 75024**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: No Frizz 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:

Nancy Luna

Name of Person

Rocket Lawyer

Firm/Company

5850 Granite Parkway, Suite 215

Address

Plano, TX 75024

City/State and Zip Code

nanperez@no-frizz.com

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

For further information concerning this matter, please call:

Nancy Luna at (818) 967-1467
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: No Frizz LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

1200 BRICKELL AVE SUITE 1950

MIAMI, FL 33131

Mailing address of limited liability company:

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

1200 BRICKELL AVE SUITE 1950

MIAMI, FL 33131

July 14, 2016

L16000133135

3. Date of filing/registration in Florida

4. Document number

5. (a) NANCY M PEREZ

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 BRICKELL AVE SUITE 1950

MIAMI, FL 33131

(b) _____

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

Legalinc Corporate Services Inc.

NEW Registered Office Address:

5237 SUMMERLIN COMMONS, SUITE 400

FORT MEYERS, FL 33907

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.

Nancy M. Perez

Signature of a member or authorized representative of a member

Nancy M. Perez

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.

Nancy Luna

Signature of Registered Agent

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TALLAHASSEE, FLORIDA