

L16 000 135219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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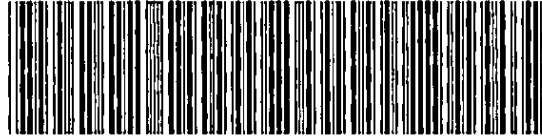
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: METHODICA LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent Registered Office Change and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FEDERICO FLOM

Name of Person

Firm Company

1331 BRICKELL BAY DRIVE APT 3909

Address

MIAMI FL 33131

City State and Zip Code

FEDERICOFLOM@GMAIL.COM

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

For further information concerning this matter, please call:

FEDERICO FLOM

Name of Person

at ()

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: METHODICA LLC

2. (a) Principal office address of limited liability company
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company.
(Note: MAY BE POST OFFICE BOX)

1331 BRICKELL BAY DR APT 3909

1331 BRICKELL BAY DR APT 3909

MIAMI, FL 33131

MIAMI, FL 33131

07/19/2016

L16000135219

3. Date of filing registration in Florida

4. Document number

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

MB7 CORPORATE SERVICES LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

777 BRICKELL AVE 1210

MIAMI, FL 33131

(b) Enter name of NEW Registered Agent and or NEW Registered Office address

FEDERICO FLOM

NEW Registered Office Address

1331 BRICKELL BAY DR APT 3909

MIAMI, FL 33131

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 member authorized representative of a member

FEDERICO FLOM

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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00