

LG 000 184 961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

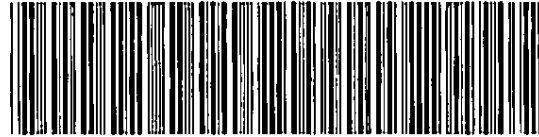
(Business Entity Name)

(Document Number)

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FILED  
2017 OCT 23 AM 9:54  
CLERK OF COURT  
JULIA A. HARRIS

OCT 24 2017  
J. HARRIS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VOOLAMA 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:

DEAN BROWN  
Name of Person

VOOLAMA LLC  
Firm/Company

1908 SW 12 AVENUE  
Address

FORT LAUDERDALE, FL, 33315  
City/State and Zip Code

dean.brown@Voolama.co  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEAN BROWN at ( 904 ) 401-2255  
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: VOOLAMA LLC
2. (a) 1005 W STATE RD 84 (b) 1005 W STATE RD 84  
Principal office address of limited liability company: Mailing address of limited liability company.  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
- SUITE #127 SUITE #127  
FT. LAUDERDALE, FL 33315 FT. LAUDERDALE, FL 33315
3. 10-04-2016 4. L16000184961  
Date of filing/registration in Florida Document number
5. (a) LEGAL INC CORP SERVICES INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
5237 SUMMERLIN COMMONS  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SUITE #400  
FORT MYERS FL 33907
- (b) DEAN BROWN  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1005 W STATE ROAD 84  
NEW Registered Office Address:  
SUITE #127  
FT. LAUDERDALE FL 33315

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Filing Stamp

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

DEAN BROWN  
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]  
Signature of Registered Agent