

L17000033091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

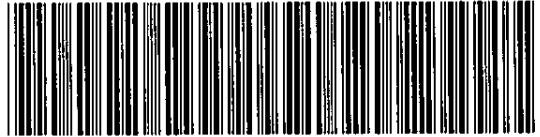
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 FEB 12 AM 9:25

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FEB 16 2018

01/18/18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 26, 2018

DAINAN N NEMBHARD  
2143 WILSONS PLOVER CIRCLE  
NAVARRE, FL 32566

SUBJECT: HOW SOON CAN WE CLOSE, LLC  
Ref. Number: L17000033091

We have received your document for HOW SOON CAN WE CLOSE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Corporation, but your entity is a Florida Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Brittany M Figueroa  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 118A00001799

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** REGISTERED AGENT CHANGE - How Soon Can We Close  
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:

DAINIAN N. NEMBHARD  
Name of Person

How Soon Can We Close LLC  
Firm/Company

2143 WILSONS FLOWER CIRCLE  
Address

NAVARO FL 32566  
City/State and Zip Code

dainian.nembhard@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dainian Nembhard at (318) 573-4015  
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  
*Enclosed.*

☐ \$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: Haw Soon Can We Close
2. (a) 2143 Wilsons Plover Cir. <sup>NAVARRE, FL 32566</sup> 2143 Wilsons Plover Cir. Navarre FL, 32566  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 2/10/2017 Date of filing/registration in Florida 4. L17000033091 Document number

5. (a) United States Corporation of Agents, Inc  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oak Court  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33612

- (b) Damian Nemphard  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

2143 Wilsons Plover Cir.  
NEW Registered Office Address:

Navarre, FL 32566

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DIVISION OF CORPORATIONS  
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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

CRISTINA SASSO  
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