## L17000241781

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Letter Number: 720A00016879

## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2020

ABDUL SHAIKH 177 E. GRAVES AVE. ORANGE CITY, FL 32763

SUBJECT: BLAZAR PROPERTIES, LLC

Ref. Number: L17000241781

We have received your document for BLAZAR PROPERTIES, 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):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6842.

Deborah Bruce Corporate Records Supervisor II

www.sunbiz.org

## **COVER LETTER**

Division of Corporations	
SUBJECT: Blazar Properties, LLC Name of Limited Li	ability 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 f	ollowing:
Abdul Shaikh Name of Person	
Plazar Properties Firm/Company	_
177 E. Graves Ave. Address	_
Orange City, FL 32763 City/State and Zip Code	_
E-mail address: (to be used for future annual report notific	eation)
Abolul Shaikh at (248 Name of Person	342-5169 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

TO: Registration Section

To Whom it May Concern,

Mill That

An overpayment of \$10 dollars was made as I initially filed for change of address of registered agent as a corporation instead of an LLC.

Please see Letter Number: 720A00016879

Best Regards,

Dr. Abdul Shaikh

## 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. Na	nne of the limited liability company:	overti	es, LLC		
2. (a)			177 E. Gra	ver Ave.	
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	("/_	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	Orange City, FL 32767		Orange Git	y, FL 327	63
		_	4.5		
2	11/19/17		170002	_:	
3.		4.	Document	t number	
5. (a)	Registered Agent and Registered Office shown on the records of the	#15 - al An 15 -			
		riorida Def	H. of State:		
	2431 Pine Oak Tray) Registered Office Address (MUST BE FLORIDA STREET ADD	DRESS			
	Registered Office Address - PARST HE FEORIDA STREET AET	<u> Mindy</u>			<b>I</b>
	Sanford .FL		3	2020 SEP	TI
(b)	Abdul Shajkh Enter name of NEW Registered Agent and/or NEW Registered Off			<b>~</b>	
	177 E. Graves Ave.		_	A B 33	<b>©</b>
	NEW Registered Office Address:				
	Orange Gity , FL	327	63	,	
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the regvill be identical. Or, in the case of a Florida limited liabil are authorized by an affirmative vote of the members of the limited of organization or the operating agreement of the limited liability.	gistered o lity compa he limited	ffice and the busin any, it is hereby co Hiability company	ness office of the onfirmed that the	registered change(s)
	Mul Sha ive ture of a member or authorized representative of a member		Abdul Sh Printed or t	haikh	
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agree tons of all statutes relative to the proper and complete per igations of my position as registered agent as provided for ely reflect a change in the registered office address, I here if in writing of this change.	to act in t formance or in Chap chy confir	his capacity. I fur of my duties, and ster 605, F.S. Or, m that the limited	ther agree to co 'I am familiar w if this document liability compar	mply with the ith and accept is being filed by has been
Signatu	re of Registered Agent				