

# L17000269628

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

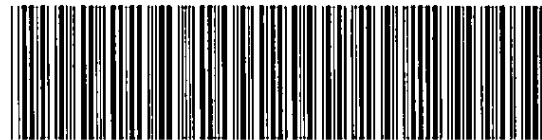
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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S TALLENT  
JUL 30 2019

FILED  
2019 JUL 29 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 12, 2019

CHONTHICHA GRAY  
PROAUTHENTICATORS LLC  
7565 SAVANNAH LANE  
LAKE WORTH, FL 33463

SUBJECT: PROAUTHENTICATORS LLC  
Ref. Number: L17000264628

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 319A00014054

2019 JUL 29 PM 12:56

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2019

CHONTHICHA GRAY  
PROAUTHENTICATORS LLC  
7565 SAVANNAH LANE  
LAKE WORTH, FL 33463

SUBJECT: PROAUTHENTICATORS LLC  
Ref. Number: L17000264628

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 919A00013116

2019 JUN 11 AM 10:08  
RECEIVED  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

RECEIVED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ProAuthenticators 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:

Chonthicha Gray

Name of Person

ProAuthenticators LLC

Firm/Company

7565 Savannah Lane

Address

Lake Worth, Florida 33463

City/State and Zip Code

ProAuthenticators@gmail.com ✓

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

For further information concerning this matter, please call:

Chonthicha Gray

Name of Person

540

at (

7487055

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: ProAuthenticators LLC

2. (a) 7565 Savannah Lane (b) 7565 Savannah Lane

Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

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

Lake Worth

Lake Worth

Florida 33463

Florida 33463

3. 12/29/2017 Date of filing/registration in Florida 4. L17000264628 Document number

5. (a) Chonthicha Gray  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
8901 Odell Drive

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Boynton Beach

FL 33472

(b) Chonthicha Gray  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7565 Savannah Lane

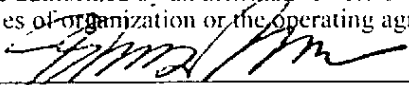
**NEW** Registered Office Address:

Lake Worth

FL 33463

**FILED**  
2019 JUL 29 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FL

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.

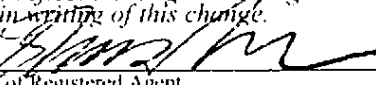


Signature of a member or authorized representative of a member

**CHONTHICHA GRAY**

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 of Registered Agent