

L1800000 4442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

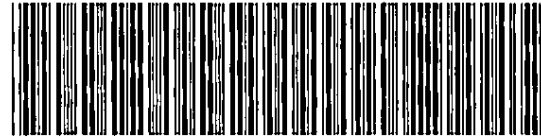
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18 OCT 26 PM 2:20
TALLAHASSEE, FLORIDA

K SALV

GEC 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cybervich 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:

Tatyana Petrovich

Name of Person

Cybervich LLC

Firm/Company

10360 Lovegrass Ln

Address

Orlando, FL 32832

City/State and Zip Code

tdeeva@gmail.com

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

For further information concerning this matter, please call:

Tatyana Petrovich

407

844-9413

at ()

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

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.

Cybervich LLC

1. Name of the limited liability company: _____

10360 Lovegrass Ln

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Orlando, FL 32832

Orlando, FL 32832

01/05/2018

L18000004442

3. Date of filing/registration in Florida

4. Document number

Tatyana Petrovich

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

4963 Southlawn Ave

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando 32811
FL

Tatyana Petrovich

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

10360 Lovegrass Ln

NEW Registered Office Address:

Orlando 32832
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.

T. Petrovich

Signature of a member or authorized representative of a member

Tatyana Petrovich

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.

T. Petrovich

Signature of Registered Agent

18 OCT 26 PM 2:21
TALLAHASSEE, FLORIDA