

L180000017615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

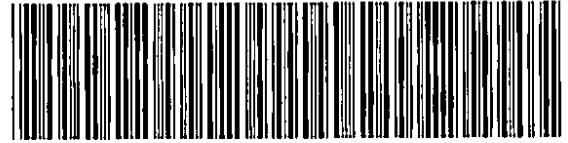
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2018

MICHAEL WALDING
3606 WESTBURY DR
JACKSONVILLE, FL 32224

SUBJECT: SARMLABZ LLC
Ref. Number: L18000017615

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

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The new registered agent needs to sign.

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

Octavia L Simmons
Regulatory Specialist III

Letter Number: 918A00012431

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SarmLabz 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:

Michael Walding
Name of Person

SarmLabz LLC
Firm/Company

3606 eastbury dr
Address

Jacksonville FL 32224
City/State and Zip Code

sarm.labz@sarmlabz.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Walding at (904) 735 2688
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

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**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: Samlabz LLC

2. (a) 3606 eastbury dr (b) 3606 eastbury dr

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Tax FL 32224

Tax FL 32224

3. 11/19/18
Date of filing/registration in Florida

4. L18000017615
Document number

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

4480 Deenwood lake Pkwy #433
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tax, FL 32216

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

3606 eastbury dr
NEW Registered Office Address:

Tax, FL 32224

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

Michael Walding
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

18 DEC -6 AM 11:32