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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SULKER

OCT 21 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IKSPECS 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:

Igor Khalfin

Name of Person

IKSPECS LLC

Firm/Company

8611 Bridle Path Ct

Address

Davie, FL 33328

City/State and Zip Code

iksspecs@gmail.com

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

For further information concerning this matter, please call:

Igor Khalfin

at (305) 450-8539

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OF
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, Florida.

1. Name of the limited liability company: IKSPECS LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

8611 Bridle Path Ct

Davie, FL 33328

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

8611 Bridle Path Ct

Davie, FL 33328

05/08/2018

L18000115429

3. Date of filing/registration in Florida 4. Document number

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

KHALFIN, IGOR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

16740 NE 9TH AVE 811

NORTH MIAMI BEACH, FL 33162

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

KHALFIN, IGOR

NEW Registered Office Address:

8611 Bridle Path Ct

Davie, FL 33328

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise the articles of organization or the operating agreement of the limited liability company.

Igor Khalfin
Signature of a member or authorized representative of a member Printed or typed name of signer

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 the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document merely reflects a change in the registered office address, I hereby confirm that the limited liability company has notified in writing of this change.

Igor Khalfin
Signature of Registered Agent