

418000122888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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07348

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mask International, 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:

Sandia Korosh-Wright
Name of Person

Mask International, LLC
Firm/Company

1643 Williamsburg Square
Address

Lakeland FL 33803
City/State and Zip Code

Mask561@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandia Korosh-Wright at (863) 327-9551
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 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: Mask International, LLC

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)

3. May 16, 2018 4. L18000122888
Date of filing/registration in Florida Document number

5. (a) Sandia N Korosh-Wright
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2155 Sandra Beaujard
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Blvd STE 206
Lakeland, FL 33813

(b) Sandia N Korosh-Wright
Enter name of NEW Registered Agent and/or NEW Registered Office address:

2155 Sandra Beaujard
NEW Registered Office Address:
Blvd Apt 106
Lakeland, FL 33813

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.

Sandia Korosh-Wright Sandia Korosh-Wright
Signature of a member or authorized representative of a member/Registered Agent 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.

See above
Signature of Registered Agent

FILED
2018 JUN 29 AM 9:36
STATE DEPT. OF REVENUE
TALLAHASSEE, FLORIDA

Date 06/25/2018

Address Change

MASK INTERNATIONAL, LLC

Document Number: L 18000122888

Incorrect information:

Registered Agent Name & Address and Document Images Article 11, Article 111 & Article 1V.

STE 206 is incorrect.

Correct information:

Registered Agent Name & Address and Document Images Article 11, Article 111 & Article 1V

should be:

2155 SANDRA BEAUJARD BLVD APT 106 LAKE LAND, FL 33813

Principal Address, Mailing Address and Authorized Person(s) Detail are correct.

Thank you,

Saudia Korosh-Wright