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| Special Instructions to I | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporat | | | . " | | | |
|---|---------------------|------------------|--|-----------|--------------|---------------------|
| SUBJECT: Limerex LLC | | | | | | |
| | Nam | e of Limited L | iability Company | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed Registered Age | ent/Registered Offi | ce Change and | fee(s) are submitted for filing. | | | |
| Please return all corresponde | ence concerning thi | s matter to the | following: | | | |
| Vivekanand Paul | | | | | | |
| Nam | ne of Person | | - - | | | |
| Limerex LLC | | | | | | |
| Firm | n/Company | | _ | ~~. | ~; | |
| 542 N Woodland St | | | | | 2019 H.ì.Y | |
| Ac | idress | | _ | | ŧ | ار ارد <u>ال</u> |
| Winter Garden, FL 3478 | 37 | | | ,; | 6 PH | LED (NO |
| . City/Sta | te and Zip Code | | | 7 | ယ္ | C. |
| LimerexIIc@hotmail.con | n | | | : | - | |
| E-mail address: (to be t | used for future ann | ual report notif | lication) | | | |
| For further information conc | erning this matter. | please call: | | | | |
| Vivekanand Paul | | 592 | 6236562 | | | · |
| Name of Per | rson | | Area Code & Daytime Telephor | ne Number | ı | |
| STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida | tions ter Circle | Re Di P.G | AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 Illahassee, Florida 32314 | | | |
| Enclosed is a check | for the following | amount: | | | | |
| ☑ \$25 Filing Fee | | - \$: | 55 Filing Fee & Certified Copy | | | |

INHS18 (2/14)

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.

| Principal office address of limited liability company: | (b) | | |
|--|--|--|------------------|
| (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX | |
| Winter Garden, FL 34787 | Winte | er Garden, FL 34787 | |
| May 16, 2018 | L1800 | 0123117 | |
| Date of filing/registration in Florida | | Document number | |
| (a) United States Corporation Agents, INC | | | |
| Registered Agent and Registered Office shown on the records o 13302 Winding Oak Court | of the Florida Dept. of | State: | |
| Registered Office Address (MUST BE FLORIDA STREET Suite A | " ADDRESS) | | 2019 # s v |
| Tampa | L ³³⁶¹² | | ₹ |
| (b) Vivekanand Paul Enter name of NEW Registered Agent and/or NEW Registere | d Office address: | -6 PH 3: 14 | |
| NEW Registered Office Address: | | <u> </u> | |
| 542 N Woodland St | | | |
| Winter Garden . FI | L_34787 | | |
| ne limited liability company is not organized under the la change or changes are made, the Florida street address on the will be identical. Or, in the case of a Florida limited liables authorized by an affirmative vote of the members articles of organization or the operating agreement of the | of the registered of iability company, of the limited liab | fice and the business office of the reg it is hereby confirmed that the change ility company or as otherwise provide | gistered e(s) |
| welayand Want | Vivekanan | d Paul | |
| gnature of a member or authorized representative of a member | Printed or typed name of signee | | |

Signature of Registered Agent