

# C18000189418

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : SUPERBIZ.COM, INC.  
Account Number : 120070000160  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

2018 AUG 21 AM 8:55

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Email Address: \_\_\_\_\_

LLC REGISTERED AGENT CHANGE  
ZIKZAK CONNECT LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
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AUG 22 2018

EXAMINER

2018 AUG 21 PM 12:20

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY H18000244364 3

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: ZIKZAK CONNECT LLC

2. (a) 1429 VIKING COURT (b) P.O. BOX 67  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

CAPE CORAL, FL 33904

MEDINAH, IL 60157

3. AUGUST 07, 2018 4. L18000189418  
Date of filing/registration in Florida Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1429 VIKING COURT

CAPE CORAL, FL 33904

(b) A1A REGISTERED AGENT, INC.

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

NEW Registered Office Address:

5647 110TH AVENUE N

ROYAL PALM BEACH, FL 33411

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.

Robert Marino  
Signature of a member or authorized representative of a member

ROBERT MARINO

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.

Imaf Maki  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00

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