

L18000221475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

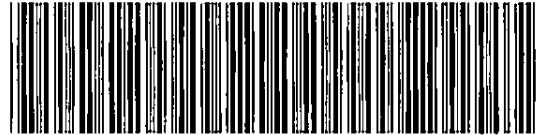
(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2018

ON DEMAND INSTALLER NETWORK LLC
IVAN MELENDEZ
12397 S ORANGE BLOSSOM TR #21-104
ORLANDO, FL 32837

SUBJECT: ON DEMAND INSTALLER NETWORK LLC
Ref. Number: L18000221475

We have received your document for ON DEMAND INSTALLER NETWORK 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):

The registered agent must sign accepting the designation.

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

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 818A00022147

2018 NOV 15 11:10:00
CORP. DIV.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: On Demand Installer Network 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:

Ivan Melendez

Name of Person

On Demand Installer Network LLC

Firm/Company

12397 S Orange Blossom Tr, 21-104

Address

Orlando, FL 32837

City/State and Zip Code

info@ondemandinstallernetwork.com

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

For further information concerning this matter, please call:

Ivan Melendez

at (407) 7442917

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: On Demand Installer Network LLC
2. (a) 13350 Heron Cove Dr
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Orlando, FL 32837
- (b) 12397 S Orange Blossom Tr
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
21-104
Orlando, FL 32837
3. 9/18/2018 Date of filing/registration in Florida
4. L18000221475 Document number

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

13350 Heron Cove Dr

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando, FL 32837

- (b) Julio Montezuma

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

13688 Beauregard Pl

NEW Registered Office Address:

Orlando, FL 32837

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

Ivan Melendez

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

FILED
18 NOV 15 AM 8:40
TALLAHASSEE, FLORIDA