Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE **EMI MARKETING LLC**

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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.

<i>Florida</i> 1. Na	ne of the limited liability company: emi mark	ketin	g Ilc				
2. (a)			(b)				
 . (11)	Principal office address of limited liability company:		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 7901 4th St N STE 300 St. Petersburg FL 33702				
	(Note: MUST BE STREET ADDRESS) 7901 4th St N STE 300						<u></u> /
	St. Petersburg FL		St. Peter	Sbury FL 33702			
	01/01/2019		L1800	0280185			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	RINDOKAS, EDVARDAS						
	Registered Agent and Registered Office shown on the records of	; ;					
	7705 111TH TER E						
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRE</u>	<u>SS)</u>				
	PARRISH, FI	342	19		: -	20;	
(b)	Registered Agents Inc.				-	2022 MAY 1	-
(17)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	iddress:	:+: <u>'</u>	: • !" <u>.</u>	<u>~</u>	: را <u>ت</u>
	7901 4th St N				• • • • • • • • • • • • • • • • • • • •	9 PH	
	NEW Registered Office Address:						
	STE 300		- 1811 11	-	••	12	
	St. Petersburg	_L 3370)2				
the cha agent v was/w	imited liability company is not organized under the lainge or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the re iability of the I	gistered office company, it is imited liabilit	c and the business of s hereby confirmed y company or as otl	office o that th	if the ri	egistered ige(s)
	D: P		iley Park				
Signa	iture of a member or authorized representative of a member	_		Printed or typed name	ofsigne	æ	

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent