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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LIS CYBER SOLUTIONS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANK T. Smith

Name of Person

LIS CYBER SOLUTIONS LLC

Firm/Company

3820 NORTHALE BLVD, Suite 205A

Address

Tampa FL 33624

City/State and Zip Code

tallant.smith@liscybersolutionsllc.com

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

For further information concerning this matter, please call:

FRANK T Smith

Name of Person

at 813 444-5251

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: US CYBER SOLUTIONS LLC

2. (a) 3820 NORTHDALE BLVD Principal office address of limited liability company;  
(Note: **MUST BE STREET ADDRESS**)

Suite 205A  
Tampa, FL 33624

(b) 3820 NORTHDALE BLVD Mailing address of limited liability company;  
(Note: **MAY BE POST OFFICE BOX**)

Suite 205A  
Tampa, FL 33624

3. 5-14-2019 Date of filing/registration in Florida

4. L19000130182 Document number

5. (a) FRANK T. Smith  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1112 E. KENNEDY BLVD.  
Tampa, FL 33559

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

FRANK T. Smith  
**NEW Registered Office Address:**  
3820 NORTHDALE BLVD  
Tampa, FL 33624

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

FRANK T. Smith  
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