

L20000030451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

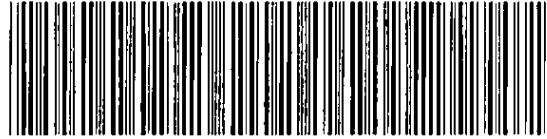
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 AUG -1 AM 9:17
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 11/24/23 BY 60322 UCBAW

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Click Labs Development

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:

Vanessa Johnson

Name of Person

Click Labs Development

Firm/Company

924 N Magnolia Ave, Suite 202, Unit #5444

Address

Orlando, FL, 32803

City/State and Zip Code

hello@clicklabsdev.com

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

For further information concerning this matter, please call:

Vanessa Johnson

Name of Person

949 842-9863
at ()

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Click Labs Development, LLC
2. (a) 924 N Magnolia Ave
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Suite 202
Unit #5444
Orlando, FL 32803
- (b) 924 N Magnolia Ave
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Suite 202
Unit #5444
Orlando, FL 32803
3. Date of filing/registration in Florida 4. Document number
5. (a) Vanessa Johnson
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
357 Almeria Ave
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
#1501
Coral Gables, FL 33134
- (b) Taylor Newman
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Northwest Registered Agent LLC
NEW Registered Office Address:
7901 4th St N STE 300
St. Petersburg, FL 33702

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ALACHUA COUNTY
CLERK

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.

Vanessa Johnson
Signature of a member or authorized representative of a member

Vanessa Johnson
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.

Taylor Newman
Signature of Registered Agent