

L20000063258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

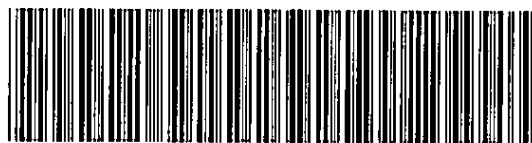
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2021 SEP -10 PM 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED

2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

23 SEP 10 AM 10:58

S:

August 13, 2021

LOBBAN VALET CLEANING LLC  
1678 E SILVER STAR RD  
OCOOEE, FL 34761

SUBJECT: LOBBAN VALET CLEANING LLC  
Ref. Number: L20000063358

We have received your document for LOBBAN VALET CLEANING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 821A00019407

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LOBBAN VALET CLEANING 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:

ARIANNA CARRINGTON-HOOKER

Name of Person

INNOVATIVE TAX SOLUTIONS OF CENTRAL FLORIDA INC

Firm/Company

1678 E SILVER STAR RD

Address

OCFEE FL 34761

City/State and Zip Code

INFO@ITSCFL.COM

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

For further information concerning this matter, please call:

ARIANNA CARRINGTON-HOOKER

407

499-2967

at ( )

Name of Person

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: LOBBAN VALET CLEANING LLC
2. (a) 3085 WILLOW BEND BLVD  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
ORLANDO, FL 32808
- (b) 3085 WILLOW BEND BLVD  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
ORLANDO, FL 32808
3. 02/26/2020 Date of filing/registration in Florida
4. L20000063358 Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
LOBBAN, LUCAN S, JR

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

3085 WILLOW BEND BLVD

ORLANDO, FL 32808

- (b) INNOVATIVE TAX SOLUTIONS OF CENTRAL FLORIDA INC

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

**NEW Registered Office Address:**

1678 E SILVER STAR RD

OCOEE, FL 34761

**FILED**  
2021 SEP 16 PM 3:55  
CLERK OF STATE  
TALLAHASSEE, FL

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.

Lucan Lobban  
Signature of a member or authorized representative of a member

LUCAN S LOBBAN JR

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.*

Charmaine Bennett-Hicks  
Signature of Registered Agent