8/31/22, 9.25 AM

Division of Corporations



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(((H22000297274 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

Email Address:\_

## LLC REGISTERED AGENT CHANGE LAB INVESTMENT GROUP LLC

Certificate of Status	0
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	COVER LE	ETTER E & B		
TO: Registration Section Division of Corporations		:		
LAB INVESTMENT GROUP SUBJECT:	LLC			
	e of Limited Lie	ability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.		
Please return all correspondence concerning this	s matter to the f	following:		
Cheyenne Moseley				
Name of Person		_		
Legalzoom.com, Inc.				
Firm/Company		<del>-</del>		
101 N. Brand Blvd., 11th Floor				
Address	<del></del>	<del>_</del>		
Glendale, CA 91203				
City/State and Zip Code	<del> </del>	_		
sareena_01@yahoo.com				
E-mail address: (to be used for future annu	ual report notifi	cation)		
For further information concerning this matter,	please call:			
Cheyenne Moseley	800	773-0888 ext 9724		
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	<b>2</b> \$5	5 Filing Fee & Certified Copy		
INHS18 (2/14)				

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

LegalZoom.com, Inc.

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. Na	ame of the limited liability company: LAB INVEST	MENT G	ROUP LI	LC							
2. (a)	• • •	(b)									
z. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)								
	14650 SW 104 AVE. MIAMI, FL 33176		14650 SW 104 AVE. MIAMI, FL 33176				14650 SW 104 AVE.				
	08/12/2020	Ĺ	.2000024	5478							
3.	Date of filing/registration in Florida	4.	•	Document numb	er						
5. (a)											
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida I	Dept of State	C							
	UNITED STATES CORPORATION AGENT	S, INC.									
	Registered Office Address	ADDRESS)									
	5575 S. SEMORAN BLVD. 36										
	ORLANDO , FL	32822		•	Tien	20					
				•		2022 AUG	_				
(b)	Enter name of NEW Registered Agent and/or NEW Registered			•		S	7				
	Enter name of NEW Regutered Agent and/or NEW Registered	a Onice and	ress:		25 A	$\frac{\omega}{}$					
	Angela Lane				777 - 777 - 777	PK					
	NEW Registered Office Address:		<del></del>	•		<u></u>	C				
	14650 SW 104th Ave				50	2					
	Miami , FI	33176	•								
the chi agent was/w the art  Signi I here provis the ob to mer notific	limited liability company is not organized under the lar ange or changes are made, the Florida street address or will be identical. Or, in the case of a Florida limited lifere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the attire of a member or proper organization of the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. It is writing of this change.	f the regist iability corof the limited limite	ered office npany, it is led liability com any Lane in this capence of my chapter 605 aftern that it	and the business hereby confirm y company or as apany.  Printed or typed na accity. I further a	s office of ed that the otherwise une of signer	the received	gistered ge(s) ded in				