

L20000257252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

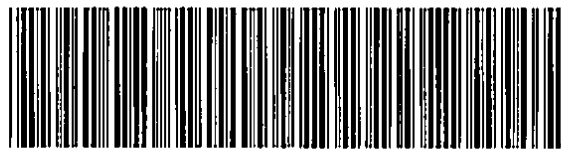
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lampkin Ventures, 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:

Roman Lampkin
Name of Person

LAMPKIN VENTURES, LLC
Firm/Company

11316 Sawmill rd
Address

Jacksonville, FL 32225
City/State and Zip Code

RLampkin500@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roman Lampkin at (904) 508-9621
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: LAMPKIN VENTURES, LLC

2. (a) Roman Lampkin Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

11316 Sawmill Rd
Jacksonville, FL 32225

8/20/21

(b) Roman Lampkin Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

11316 Sawmill Rd
Jacksonville, FL 32225

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3. Date of filing/registration in Florida 4. Document number

5. (a) Legalinc Corporate Services INC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5237 Summerlin Commons
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Fort Myers, FL 33907

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

NEW Registered Office Address:

11316 Sawmill Rd
Jacksonville, FL 32225

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.

Roman Lampkin
Signature of a member or authorized representative of a member

Roman Lampkin
Printed or typed name of signer

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.

Roman Lampkin
Signature of Registered Agent

2021 OCT -8 AM 11:40