

h22000104456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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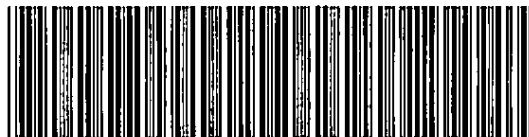
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2022 JUL 13 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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2022 JUL 13 PM 2:46

June 23, 2022

JODI SHAW  
1883 W. ROYAL HUNTE DR.  
SUITE 200  
CEDAR CITY, UT 84720 US

SUBJECT: NEW PAPER MAN, LLC  
Ref. Number: L22000104456

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 822A00014253



KYLER, KOHLER  
OSTERMILLER  
& SORENSEN

A LIMITED LIABILITY PARTNERSHIP

1883 W. Royal Hunte Dr. Suite 200  
Cedar City, Utah 84720  
Phone 435-586-9366  
Fax 435-586-9491

Jodi Shaw, Paralegal  
[jodi@kkoslawyers.com](mailto:jodi@kkoslawyers.com)

April 19, 2022

Department of State  
Division of Corporations  
The Center of Tallahassee  
2415 N. Monroe Street Suite 810  
Tallahassee, FL 32303

To Whom It May Concern:

Enclosed for processing are duplicates of the Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company for **New Paper Man, LLC**. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

**KYLER KOHLER OSTERMILLER & SORENSEN, LLP**

A handwritten signature in black ink that reads 'Jodi Shaw'. The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Jodi Shaw, Paralegal

Enclosure

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: New Paper Man, LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
603A South Matanzas Avenue  
Tampa, Florida 33609

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
603A South Matanzas Avenue  
Tampa, Florida 33609

3. February 28, 2022 4. 1.22000104456  
Date of filing/registration in Florida Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Max Miller

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
603A South Matanzas Avenue  
Tampa, FL 33609

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Registered Agent Solutions, Inc.  
NEW Registered Office Address:  
155 Office Plaza Drive, Suite A  
Tallahassee, FL 32301

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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.

Max Miller

Max Miller

Signature of a member or authorized representative of a member

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.

Thuyet Price, Authorized Representative  
Signature of Registered Agent